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(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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SECRETARY OF STATE TIVISION OF SURFICE

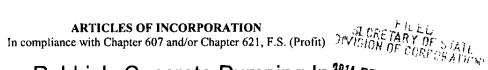
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COVER LETTER

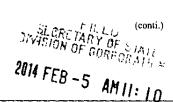
Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Rob	bie's Concrete F	Pumping, Inc.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
	obert J. Howard Nam 014 Clipper Terra	e (Printed or typed)	
	10 d at 2	Address	
La	aBelle, FL 3393	5	
	City	State & Zip	
86	63-234-6098		
	Daytime 1	Telephone number	
re	dfox892@hotma	ail.com	
	E-mail address: (to be use	d for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.



ARTICLE I NAM The name of the corporat	TE Robbie's Con	crete Pump	oing In 814 FEB -5 AMII: 10
ARTICLE II PRII	NCIPAL OFFICE Principal <u>street</u> address		Mailing address, if different is:
2014 Clippe		 	· · · · · · · · · · · · · · · · · · ·
LaBelle, FL	33935		
ARTICLE III PUR		***************************************	
• •	he corporation is organized is: less activity including concrete pum	ping and other const	ruction-related activity
	,		
	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,	
		· · · · · ·	
ARTICLE IV SHA The number of shares of	RES 1000		
The number of shares of	stock is:		
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECT	rors	
	Robert J. Howard, Pres.		
Address	2014 Clipper Terrac		
Address	LaBelle, FL 33935		the state of the s
Name and Title:			
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	



Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
The name and F	orida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	Robert J. Howard	_	
Address:	2014 Clipper Terrace		
	LaBelle, FL 33935	_	
ARTICLE VII	INCORPORATOR		
The name and ac	ddress of the Incorporator is:		
Name:	Robert J. Howard	_	
Address:	2014 Clipper Terrace		
	LaBelle, FL 33935	-	
		_	
Having been name this certificate; J	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	s for the above stated corpora gistered agent and agree to ac	tion at the place designated in this capacity
Kolan	Xh		01/21/2014
\	Required Signature/Registered Agent		Date
I submit this doc document to the	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the fa ny as provided for in s.817.155	lse information submitted in a 5, F.S.
(In)	HULL S		01/21/2014
100	Required Signature/Incorporator	<u></u>	Date