

PI5000058696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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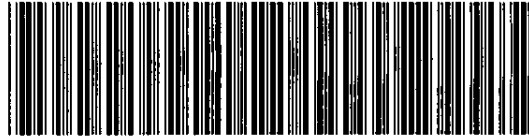
(Business Entity Name)

(Document Number)

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mpd 7/15

COVER LETTER

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

SUBJECT: ALBOE CONSTRUCTION SERVICES OF FLORIDA
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) INCORPORATED

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: NATHAN ROOKE EVERITT
Name (Printed or typed)
627 BLEDEN ROAD
Address
HOVE, TEXAS 75459
City, State & Zip
214-906-7220
Daytime Telephone number
NROOKE@AOL.COM
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: ALBOE CONSTRUCTION SERVICES OF FLORIDA Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

201 W. CHRISTINA BLVD.
SUITE 3
LAKE LAND, FLORIDA 33813

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONSTRUCT FACILITIES TO

MANAGE MUNICIPAL WATER PLANT RESIDUALS

HAZARDOUS MATERIALS CLEAN UP + MANAGEMENT

SELECTIVE DEMOLITION SERVICES

STORM (HURRICANE) EMERGENCY CLEAN UP

DEBRIS REDUCTION + DISPOSAL

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NATHAN R. EVERILL

Name and Title: _____

Address: 627 BELDEN ROAD

Address: _____

HOWE, TEXAS 75459

PRESIDENT

Name and Title: MICHELE EVERILL

Name and Title: _____

Address: 627 BELDEN ROAD

Address: _____

HOWE, TEXAS 75459

VICE PRESIDENT

Name and Title: JACQUELINE ROBINSON

Name and Title: _____

Address: 627 BELDEN ROAD

Address: _____

HOWE, TEXAS 75459

SECRETARY / TREASURER

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: EVIN NETZER
Address: 201 W. Christina Blvd., Suite 3
Lakeland, FL 33813

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FLORIDA
DEPARTMENT OF STATE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NATHAN ROOKE EVERILL
Address: 627 BELDEN ROAD
HOWE, TEXAS 75459

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: AS SOON AS PRACTICAL (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Evin Netzer Required Signature/Registered Agent 7/7/15 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Nathan Rook Everill Required Signature/Incorporator 7/7/15 Date