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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tullahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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DEEP SOUTH CON	ISTRUCTION	OF_		
SW FL, INC.	· · · · · · · · · · · · · · · · · · ·			
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Walk-In	Will Pick Up		c	Courier
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpo		ONSTRUCTION OF	SW FL. INC.	
ARTICLE II PRIM 19500 SKIPPER RD.	VCIPAL OFFICE Principal <u>street</u> address		Mailing address, if differe	nt is:
N. FT. MYERS, FL		SAME		
• •	POSE the corporation is organized is: age in any activities or business permitt		: United States and Florida	3.
	age at any average of contrast primary			
				16 AP
				ن الم
				PH :
ARTICLE IV SHAL				PH 4: 24
ARTICLE V INIT	IAL OFFICERS AND/OR DIRECTOR	<u>.</u>	AUGEORIA DA BUED	
Name and Title: RICHARD PARKER, PRES.		Name and Title	: VICTORIA PARKER, S 19500 SKIPPER RD.	SEC/TREAS
Address	19500 SKIPPER RD. N. FT. MYERS, FL 33917	Address:	N. FT. MYERS, FL 33	917
Name and Titl	JEFF KUJATH, VP	Name and Title	;	
Address	19500 SKIPPER RD	Address:		-
	N. FT. MYERS, FL 33917			
			The state of the s	· ····
Name and Titl	e:	Name and Title		
Address		Address:		

Name a	nd Title:	Name and Title:
Addre	ss	Address:
ADTICLE VI	DECISTEDED ACENT	
	<u>REGISTERED AGENT</u> Florida street add <u>ress</u> (P.O. Box NOT accept	able) of the registered agent is:
Name:	RICHARD PARKER	
Address:	19500 SKIPPER RD.	
	N. FT. MYERS, FL 33917	
ARTICLE VII	<u>INCORPORATOR</u>	AP A
The name and a	address of the Incorporator is:	
Name:	RICHARD PARKER	
Address:	19500 SKIPPER RD.	F. 24
	N. FT. MYERS, FL 33917	
Effective date, i	EFFECTIVE DATE: f other than the date of filing:	(OPTIONAL)
(If an effective days after the f		cannot be more than five business days prior or 90 business
	e inserted in this block does not meet the app effective date on the Department of State's re	licable statutory filing requirements, this date will not be listed as cords.
Having been na this certificate, i	med as registered agent to accept service of am familiar with and accept the appointmen	process for the above stated corporation at the place designated in t as registered agent and agree to act in this capacity
X Ruha	Required Signature/Registered Age	4-5-16
I submit this do	cument and affirm that the facts stated here	in are true. I am aware that the false information submitted in a
document to the	Department of State constitutes a third degre	C 4 11
Requ	aired Signature/Incorporator	$\frac{4-5-16}{\text{Date}}$