## P16000051505

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
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SECRETARY OF SIAT

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## **COVER LETTER**

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

SUBJECT:	HYP	CONSTRUCTIO	on inc.
<del></del>	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	HYP CONSTRU		
-	1025 W. OA	K RIOGE R ddress	OAO
· · ·	ORLANDO,	FLORIDA 3 State & Zip	2809
<del></del>		7 - 860 - 66	48
	Daytime re	lephone number	

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

E-mail address: (to be used for future annual report notification)

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

FILED

The name of the corporation shall be: HYP CONSTRUC	TION INC. 16 JUN 10 PM 12: 38
ARTICLE II PRINCIPAL OFFICE Principal street address	SECRETARY OF STATE Mailing address Af Unfortation (ORIDA
1025 W. OAK RIOGE RD.	SAME
ORLANDO, FLORIDA 32809	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: LaBullo 2007.	L CONSTRUCT BUILDINGS,
RENOVETE BUILDINGS,	•
2. HIRE SUB CONTRUCTORS and MANA	ACE THE CONSTRUCTION
THAMSELYES, INSPECTING WORK	SITES
3. DO BUILDING MAINTONANCE and	BUILDING RESTORATION
4. ENSURY THAT CONSTRUCTION ME	
LODES AND ORDINANCES, ZONING REG SPECIFICATIONS.	
The number of shares of stock is: 300 SHARES	-
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: HARR 15 Comwell, PRES. Nar	ne and Title:
Address 1025 W. OAK POCE PO, Add	dress:
ORIANDO, F. 32809	
PRESIDENT 100 SHAR	45
Name and Title: TAL MADE WENOSU PARE	ne and Title:
Address 1025 W. OAK PLOCE PD: Add	dress:
ORLANDO, 5. 32809 V.P.	
VICE PRESIDENT 100.S	HARES
Name and Title: AL YAP SKALTARY Nar Address 1025 W. OAK RIDGE RD. Add	me and Title:
Address 1025 W. OAK RIDGE RD Add	dress:
ORIANDO, A. 32809 SECRETARY, 100 SH	JARKS

4.0 -			
,	•		•
 Name and Title	· :	Name and Title:	FILED
Address		Address:	16 JUN 10 PM 12: 38
Address		_ / iddless.	SECRETARY OF STATE
		-	NELADASSEE FLORIDA
		-	
RTICLE VI REGIS	STERED AGENT		
he <u>name and Florida</u>	street address (P.O. Box NOT acceptable) o	f the registered age	nt is:
Name:	CROMWELL HARRIS	<del>.</del>	
Address: 10	25 W. OAK RIDGE RD.	_	
_0	25 W. OAK PLOGE PO. RIANDO, FL. 37809	_	
RTICLE VII INCO	<u>RPORATOR</u>		
he <u>name and address</u>	of the Incorporator is:		
Name:	SAME (COLOR	_	
Address:	CROMUSEL HARKIS	· · · · · · · · · · · · · · · · · · ·	
-	1025 W. OAK RIDGE RO.		
-	DRIANDO, A. 37809		
IRTICLE VIII EFFI	ECTIVE DATE:		
	han the date of filing: Jung 5. listed, the date must be specific and cannot		
ays after the filing.)	moved, the date made of specific and cannot	or be more than in	e business days pitor of 70 business
	ed in this block does not meet the applicable e date on the Department of State's records.	statutory filing req	uirements, this date will not be listed as
his certificate. I am fan	registered agent to accept service of process	vistered agent and i	ed corporation at the place designated in agree to act in this capacity
CROW	Required Signature/Registered Agent		-TUNG 7 2016
	Required Signature/Registered Agent		JUNE 7, 2014 Date
submit this document	and affirm that the facts stated herein are	true. I am aware	that the false information submitted in a
ocument to the pepart	ment of State constitutes a third degree felon	iy as provided for it	n 8.81 /.155, F.S.
Pegnirad Si	MUSH HARKIS gnature/Incorporator		
Required 51	gnature/incorporator		Date