Division of Corporations

Page 1 of 1

Post of propagate 830

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000362832 3)))



H180003628323ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSTOR CORPORATE SERVICES, INC.

Account Number : 075350000353 Phone : (800)221-2972 Fax Number : (888)692-9256

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

18 DEC 26 AH 8:51

FLORIDA PROFIT/NON PROFIT CORPORATION EUROPEAN CONCRETE PUMPING INC.

0
0
02
\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

18 DEC 26 PM 4: 58

+17188897420 . p.2
12/24/2018 12:15 #347 P.002/003

ARTICLES OF INCORPORATION

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

ICLE II PRIN	<u>CIPAL OFFICE</u>		
COMANCHE CT	Principal street address	Mailing address, if differ 21 COMANCHE CT	ent is:
LM COAST, FL 32	137	PALM COAST, FL 32137	
			
TICI FIII DIIDD	OSF		_
purpose for which	OSE to cng the corporation is organized is:	gage in any lawful act or activity for	
ich corporations ma	y be organized.		
·			_
<u> </u>			
TICLE IV SHAR	ES 200		
TICLE IV SHAR number of shares of	ES 200 stock is:		
TICLE IV SHAR number of shares of	ES 200 stock is:		
number of shares of	stock is:	<u></u>	
number of shares of	stock is:		
number of shares of TICLE V INITIA Name and Title	Stock is: M. OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT	Name and Title:	
number of shares of	ALDINA HOMEM / PRES. 21 COMANCHE CT		
number of shares of TICLE V INITIA Name and Title	ALDINA HOMEM / PRES. 21 COMANCHE CT	Name and Title:	
number of shares of TICLE V INITIA Name and Title	ALDINA HOMEM / PRES. 21 COMANCHE CT	Name and Title:	
number of shares of TICLE V INITIA Name and Title	ALDINA HOMEM / PRES. 21 COMANCHE CT	Name and Title:	
number of shares of FICLE V INITIA Name and Title Address	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title:Address:	
number of shares of TICLE V INITIA Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title:	
number of shares of FICLE V INITIA Name and Title Address	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title:	
number of shares of TICLE V INITIA Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title:	
number of shares of TICLE V INITIA Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title:	
number of shares of TICLE V INITIA Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title:	
number of shares of TICLE V INITIA Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title:	
number of shares of TICLE V INITIA Name and Title Address Name and Title: Address	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title: Address:	
number of shares of TICLE V INITIA Name and Title Address Name and Title: Address	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title: Address: Name and Title:	
number of shares of TICLE V INITIA Name and Title Address Name and Title: Address	AL OFFICERS AND/OR DIRECTOR ALDINA HOMEM / PRES. 21 COMANCHE CT PALM COAST, FL 32137	Name and Title: Address: Name and Title: Address: Name and Title:	

+17188897420 μ.3 12/24/2018 12:15 #347 P.003/003

Name and Title:		Name and Title:
Addre	95	Address:
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable ALDINA HOMEM) of the registered agent is:
Address:	21 COMANCHE CT	
<u>ARTICLE VII</u>	PALM COAST, FL 32137 INCORPORATOR	
The name and a	address of the Incorporator is:	
Name:	ALDINA HOMEM	- -
Address:	21 COMANCHE CT	<u></u>
	PALM COAST, FL 32137	
Effective date, if	date is listed, the date must be specific and can	(OPTIONAL) not be more than five business days prior or 90 business
Note: If the date the document's o	e inserted in this block does not meet the applicab iffective date on the Department of State's records	le statutory filing requirements, this date will not be listed as s.
Having been nai this certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as r I Required Signature/Registered Agent	rss for the above stated corporation at the place designated in egistered agent and agree to act in this capacity 12/24/2018 Date
documents to	document and affirm that the facts stated herein are to the Department of State constitutes a third degree selony from the firm on a quired Signature Incorporator	ric. I am aware that the false information submitted in a as provided for in s.817.155, F.S. 12/24/3018 Date