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COVER LETTER

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

SUBJECT: PDE	O Construction, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an o	original and one (1) copy of the art	icles of incorporation and	d a check for:
S70.00 Filing Fee	_ + · - · · ·	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Darron Raney Name	(Printed or typed)	
i 	0328 Frog Pond Dr.		
	A	Address	
R 	Riverview, FL 33569		
	City,	State & Zip	
86	63-547-6740		
		lephone number	
cł	nristina.m@gcliconcrete.com		
_	E-mail address: (to be used	for future annual report no	otification)

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: PDD Construction, Ir	nc.	
ARTICLE II PRINCIPAL OFFICE Principal street address		tress, if different is:
10328 Frog Pond Dr.	PO Box 1197	
Riverview, FL 33569	Davenport, FL 3383	6
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	y and all lawful business purposes.	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECT		
Name and Title:		
Address	Address:	19 HA
Name and Title:	Name and Title:	2 2
Address	Address:	PM 4:47
Name and Title:	Name and Title:	
Address	Address:	

Name :	and Title:	Name and Title:
Addre	ess	Address:
ARTICLE VI	REGISTERED AGENT	
Name:	Florida street address (P.O. Box NOT acc Darron Raney	cptable) of the registered agent is:
Address:	10328 Frog Pond Dr.	
	Riverview, FL 33569	
ARTICLE VII	INCORPORATOR	2
The name and a	address of the Incorporator is:	
Name:	Darron Raney	世
Address:	10328 Frog Pond Dr.	
	Riverview, FL 33569	
Effective date, if (If an effective of filing.) Note: If the date		and cannot be more than five days prior or 90 days after the
Having been nar this certificate, I	med as registered agent to accept service of am familiar with and accept the appointment of the appointment	f process for the above stated corporation at the place designated in ent as registered agent and agree to act in this capacity 3/18/19 Date
submit this doc	ument and affirm that the facts stated her Department of State constitutes a third degi	rein are true. I am aware that the false information submitted in a ree felony as provided for in s.817.155, F.S.
Requi	red Signature/Incorporator	3(18/19 Date
•	_ ()	Date