P95000009919

TRANSMITTAL LETTER

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

000001395990 -02/01/95--01116--004 -****122.50

SUBJECT: E.G. GRADING. INC.

(Proposed corporate name - must include suffix)

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

[] \$70.00

[] \$78.75

[X] \$122.50

[] \$131.25

FROM:

Eliseo Garcia
Name (printed or typed)

11923 ANCHORAGE WAY
Address

BOCA RATON, FLORIDA 33428 City, State & Zip

407 - 488-3928 Daytime Telephone Number FILED
1895 FEB -1 All 7: 57
TALLAID STATE STORY

3 pg 3/01/02,010

ART, ES OF INCORPORATION OF E.G. GRADING, INC.

BS FB-1 III 7: 51

The undersigned incorporator to these Articles of Incorporation, a natural person competent to contract, hereby subscribes and forms a corporation for profit under the Laws of the State of Florida.

ARTICLE I: NAME

The name of the corporation is: E.G. GRADING, INC. and its principal office and mailing address is: 11923 Anchorage Way, Boca Raton, FL 33428.

ARTICLE II: NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United States and of this state.

ARTICLE III: CAPITAL STOCK

The total number of shares of capital stock authorized is One Hundred (100), which shares shall have a par value of One Dollar (\$1.00) share. Such stock shall be issued under the provisions of Section 1244 of the Internal Revenue Code.

Such stock may be issued by the corporation from time to time for such consideration as may be fixed from time to time by the Board of Directors, but at no less than par value.

ARTICLE IV: DIRECTORS

The initial director of this corporation is: Eliseo Garcia

ARTICLE V: OFFICERS

The following shall constitute the first officers of this corporation: Eliseo Garcia; 11923 Anchorage Way, Boca Raton, FL 33428 - President & Treasurer; Karen Zolnierok; 815 W. Boynton Beach Blvd., # 7-20, Boynton Beach, FL 33435 - Vice President & Secretary.

ARTICLE VI: TERM OF EXISTENCE

This corporation shall have perpetual existence.

ARTICLE VII: REGISTERED AGENT

The name and address of the initial registered agent and registered office is Eliseo Garcia; 11923 Anchorage Way, Boca Raton, FL 33428.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, acknowledged and filed the foregoing Articles of Incorporation under the Laws of the State of Florida, this 17th day of January, 1995.

Eliseo Garcia

ACKNOWLEDGMENT OF DESIGNATED AGENT:

Having been named to accept service of process for the above named corporation at the place designated in this certificate, I hereby accept to act in this capacity.

by: Elisev A arcia

STATE OF FLORIDA) COUNTY OF BROWARD) 88.:

BEFORE ME, the undersigned authority, personally appeared, Eliseo Garcia
to me well known and known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State named above this 17th day of January, 1995.

MOTARY PUBLIC STATE OF FLORIDA MY COMMISSION EXP.DEC. 9,1925 BONDED THRU GENERAL INS. UND.

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000009919

FILED

1. Corporation Name E.G. GRADING, INC.						SECRETARY OF STATE TALLAHASSEE, FLORIDA											
									Principal Place of Business Mailing Address						1.15411450	and adular from Differs Riders Differs Riders Riders	
									1100				ORAGE WAY ON FL 33428				
								11/11 90									
	iddresses are inco ncipal Office Addre				g Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida 02/01/1995										
Suite, Apt. #, etc.			Suite, Apt. #.	ille, Apt. #, ofc.			5. FEI Number Applied For										
City & State			Stato			U5 OU 1080 Not Applicable											
Zip Country		Zip	Zip Country		6. CERTIFICATE OF STATUS DESIRED S6.5.		Additional Fee required in Cert heatenst										
7. Names (and Street Address	ses of Each Officer and	or Director (Flo														
Title(s) Name of Officers and/or Directors				Street Address of Each Officer and/or Director 3 (De NOT Use Post Office Box Numbers)			City / State / Zip										
DPT	GARCIA, ELISEO			11923 ANCHORAGE WAY			BOCA RATON FL 33428										
VS	VS ZOUNIEROK, KAREN			845 W. BOYNTON BEACH BLVD., 87-2			BOYNTON BEACH PL SSISS BOXA RATON FL33428										
					1.194.165.	·*·											
																	
						9	000019794 -10/18/9601 ****375.00	F693 018001									
							1										
8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent											
GARCIA, ELISEO Street Address (6						P.O. Box Number is Not Acceptable)											
									11923 ANCHORAGE WAY BOCA RATON FL 33428					Suite, Apt. #, Etc	Suite, Apt. #, Eic.		
				City			State Zip Code										
10. 1, being appointed the registered agent of the above named corporation, am familiar with and accept the ol						EP-Walland Car	FL										
		istered agent of the ab	ove named corpo	ration, am tamillar	with and accept the o	bligations of Sec	4										
Signature of Registered	Agent X	usu Da	EGISTERED AG	ENT MUST SIGN			Date 9-29-9	<u>'</u>									
11. Do	es this cor	poration pay a	any intang	ible tax to	the atutes. Yes	□ No □	(See other side to										
12. I certify this rein	that I am an office istatement applicat	r or director or the receion, the reason for diss	iver or trustee en olution has been	npowered to execu	ite this application as properties in the satisfies	provided for in ch the requirements	apter 607 or 617, F.S. I further cets of section 607,0401 or 617,0401	, F.S., that all fees									
owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under eath.																	
ने व	•	~	خاستان د		a the files and		Q										
SIGNATURE: Clisic Signature and typed on Printed Name of Signing Officer or Director							9-29-96 40 Date Daytin	88 - 3928									

9984473 - AF