

Document Number Only

7950000 14927

C T CORPORATION SYSTEM
Requestor's Name
1311 Executive Center Drive, Ste. 200
Address
Tallahassee, FL 32301 (904) 656-8298
City State Zip Phone

4000001412874
-02/22/95--01046--014
*****70.00 *****70.00

CORPORATION(S) NAME

Lockhart Engineering & Contracting Inc

FILED
995 FEB 22 PM 2:30
SECRET
TALLAHASSEE

☒ Profit - Articles

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Fictitious Name

☐ Certified Copy

☐ Photo Copies

☐ CUS / G/S

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Acknowledgment
W.P. Verifier

2/22/95

300

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

STATE OF FLORIDA
ARTICLES OF INCORPORATION
OF

LOCKHART ENGINEERING & CONTRACTING, INC.

FIRST: THE CORPORATE NAME THAT SATISFIES THE REQUIREMENTS OF SECTION 607.0401 IS:

LOCKHART ENGINEERING & CONTRACTING, INC.

SECOND: THE ADDRESS OF THE PRINCIPAL OFFICE, AND THE MAILING ADDRESS OF THE CORPORATION IS:

6808 MIRROR LAKE AVENUE, TAMPA, FLORIDA 33634

THIRD: THE NUMBER OF COMMON SHARES THE CORPORATION IS AUTHORIZED TO ISSUE IS ONE HUNDRED (100) EACH SUCH SHARE TO BE ONE DOLLAR (\$1.00) PAR VALUE.

FOURTH: THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THE CORPORATION 6808 MIRROR LAKE AVENUE, TAMPA, FLORIDA 33634, AND THE NAME OF ITS INITIAL REGISTERED AGENT AT SUCH ADDRESS IS DAVID LOCKHART.

FIFTH: THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS OF THE CORPORATION IS TWO (2), AND THE NAMES AND ADDRESSES OF THE PERSONS WHO ARE TO SERVE AS DIRECTORS UNTIL THE FIRST ANNUAL MEETING OF SHAREHOLDERS OR UNTIL THEIR SUCCESSORS ARE ELECTED AND

FILED
1995 FEB 22 PM 2:30
TALLAHASSEE
SECRETARY OF STATE

SHALL QUALIFY ARE:

NAMES

ADDRESSES

LINDA EHRESMANN

111 S. LYNN BLVD.
UPPER DARBY, PA 19082

DAVID LOCKHART

6808 MIRROR LAKE AVE.
TAMPA, FL. 33634

SIXTH: THE NAME AND ADDRESS OF EACH INCORPORATOR IS:

NAMES

ADDRESSES

LINDA EHRESMANN

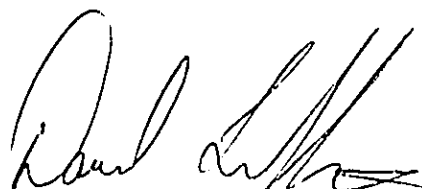
111 S. LYNN BLVD.
UPPER DARBY, PA 19082

DAVID LOCKHART

6808 MIRROR LAKE AVE.
TAMPA, FL 33634

THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF
INCORPORATION THIS 26th DAY OF January, 1995.


Linda Ehresmann


David Lockhart

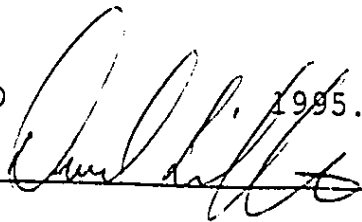
ACCEPTANCE BY THE REGISTERED AGENT AS REQUIRED IN
SECTION 607.0501 (3) F.S.: DAVID LOCKHART IS FAMILIAR
WITH AND ACCEPTS THE OBLIGATIONS PROVIDED FOR IN SECTION
607.0505.

David Lockhart

DATED

1995.

BY



David Lockhart

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 OCT 14 PM 2:39

mtu
10/18



DOCUMENT # **P95000014927**

1 Corporation Name

LOCKHART ENGINEERING & CONTRACTING, INC.

Principal Place of Business

Mailing Address

6808 MIRROR LAKE AVE
TAMPA FL 33634

6808 MIRROR LAKE AVE
TAMPA FL 33634

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/22/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3299699

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	EHRESMANN, LINDA	1116 LYNN BLVD- 6808 MIRROR LAKE AVE.	UPPER MERIDEN PA 19082- TAMPA FL 33634
D	LOCKHART, DAVID	6808 MIRROR LAKE AVE	TAMPA FL 33634
			300001981943--0
			-10/22/96--01010--020
			****375.00 ****375.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LOCKHART, DAVID
6808 MIRROR LAKE AVE
TAMPA FL 33634

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date 10/1/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements 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)(f), 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 oath.

SIGNATURE: *Linda Ehresmann* (LINDA EHRESMANN) 10/1/96 813-885-6065
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2040 (7/96)