# P95000042867

TRANSMITTAL LETTER

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

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SUBJECT: CONSTRUCTION INSTALLERS, INC.

(Proposed corporate name - must include suffix)

for:	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	x \$131.25 Filing Fee, Certified Copy & Certificate y Required		
	FROM:	FROM: STEVEN BYRD  Name (printed or typed)				
		RT 16 BOX 1	327A Address			
		TALLAHASSEE	, FLORIDA 32310			
		Ci (904) 545–3	ty, State & Zip 933			
		Daytime	Telephone number			

5/2

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

#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CONSTRUCTION INSTALLERS, INC.



#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3927 FORSYTHE WAY
TALLAHASSEE, FLORIDA 32308

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

STEVEN BYRD RT 16 BOX 1327A TALLAHASSEE, FLORIDA 32310

### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

STEVEN BYRD RT 16 BOX 1327A TALLAHASSEE, FLORIDA 32310

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

day of June, 1995.

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the	ne corporation is.	CONSTRUCTION INSTALLERS, INC.	SECULAR 2
2. The name and	I address of the reg	gistered agent and office is:	E FLORIDE STATE
	STEVEN BYRE		•
		(Name)	<del></del>
	RT 16 BOX 1	1327A Box or Mail Drop Box <u>NOT</u> ACCEPTABLE)	
	TALLAHASSEI	E, FLORIDA 32310	
	<del> </del>	(CITY/STATE/ZIP)	<del></del>

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE, (DATE)