

P96000000949

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P.O. Box 8327  
Tallahassee, FL 32314

RECEIVED  
TALLAHASSEE, FLORIDA  
JAN 27 1996

SUBJECT: KNOX MASONRY OF OSCEOLA, INC.  
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check  
for \$ 122.50.

300001671883  
-12/27/95--01059--009  
\*\*\*\*122.50 \*\*\*\*122.50

FROM:

DIANNE M. KNOX

Name (printed or typed)  
5100 N KALIGA DRIVE  
Address  
ST. CLOUD, FLORIDA 34769  
City, State, & Zip  
( 407 ) 892-3382  
Telephone Number

SHARON L. TALA

JAN - 4 1996

Note: Please provide the original and one copy of the Articles.

**ARTICLES OF INCORPORATION**

**OF**

**KNOX MASONRY OF OSCEOLA, INC.**

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:

KNOX MASONRY OF OSCEOLA, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

P. O. Box 1292  
St. Cloud, Florida 34770

**ARTICLE III SHARES**

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

500 shares

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

DIANNE M KNOX  
5100 N KALIGA DRIVE  
ST. CLOUD, FLORIDA 34769

FILED  
27 DEC 27  
1973  
TALLAHASSEE  
FLORIDA  
STATE

**ARTICLE V INCORPORATOR(S)**

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

DIANNE M. KNOX  
5100 N Kaliga Drive  
ST CLOUD, FLORIDA 34769

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

21 day of Dec, 19 95.

Dianne M Knox  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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 corporation is: KNOX MASONRY OF OSCEOLA, INC.

2. The name and address of the registered agent and office is:

DIANNE M. KNOX

(NAME)

5100 N KALIGA DRIVE

(P.O. BOX ~~NOT~~ ACCEPTABLE)

ST. CLOUD, FLORIDA 34769

(CITY/STATE/ZIP)

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 *Dianne M. Knox*

DATE 12-21-95

95 DEC 27 11 51 AM '95  
SECRET  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE