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LAW OFFICE  
OF

*Charles M. Milligan*  
A PROFESSIONAL ASSOCIATION  
ATTORNEY AT LAW

FILED

96 JUN 21 PM 12:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Civil & Criminal Trial Practice

May 21, 1996

515 Whitehead Street  
P.O. Box 1367  
Key West, Florida 33041  
(305) 294-8885  
Fax (305) 292-1121

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

100001874781  
-06/25/96--01083--008  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

RE: Certificate of Incorporation for B.A.T. CONSTRUCTION, INC.

Dear Sir:

Enclosed please find an original and copy of Certificate of Incorporation and check in the amount of \$70.00 to cover the cost of filing.

It would be most appreciated if you would file the Certificate of Incorporation forthwith and mark the filing information on the enclosed copies and return to my office in the self-addressed envelope enclosed for your convenience.

Thanking you in advance for your kind cooperation.

Sincerely yours,

  
Charles M. Milligan

CMM:ema  
Enclosures

PH  
6/26/96

**CERTIFICATE OF INCORPORATION**  
**OF**  
**B.A.T. CONSTRUCTION INC.**

**FILED**

96 JUN 24 PM 12:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

THIS IS TO CERTIFY THAT, there is hereby organized a corporation under and by virtue of Florida Statue 607.001 et seq., the "Florida General Corporate Act."

1. The name of the corporation is B.A.T. CONSTRUCTION, INC.
2. The address and zip code of this corporation's initial registered office is 624 Whitehead Street, Key West, FL 33040 the name of this corporation's initial registered agent at such address is CHARLES M. MILLIGAN. The principal address is the same as the registered agent address.
3. The purpose for which this corporation is organized is:  
To engage as a corporation for profit in any activity within the purposes for which corporations may be organized under the "Florida General Corporation Act."
4. The aggregate number of shares which the corporation shall be authorized to issue is 1,000 shares with a par values of \$1.00 per share.
5. The duration of the corporation shall be perpetual.
6. The first Board of Directors of this corporation shall consist of ONE (1) Director and the name and address of each person which is to serve as such Director is

<u>Name</u>	<u>Address</u>	<u>Zip Code</u>
Phillip Braeunig	8 West Shore Drive Summerland Key, FL	33042

7. The name and address of each incorporator is:

<u>Name</u>	<u>Address</u>	<u>Zip Code</u>
Phillip Braeunig	8 West Shore Drive Summerland Key, FL	33042

IN WITNESS WHEREOF, each individual incorporator, each being over the age of eighteen (18) years, has signed this Certificate or if the incorporator be a corporation, has caused this Certificate

to be signed by its authorized officers, this 27 day of MAY, 1996

\_\_\_\_\_  
\_\_\_\_\_

*Philip Braeunig*  
PHILIP BRAEUNIG

STATE OF FLORIDA  
COUNTY OF MONROE

Personally appeared before me, the undersigned authority, PHILIP BRAEUNIG, to me known and known to me to be the person described in and who executed the foregoing Certificate of Incorporation, and he acknowledged before me, according to law, that he made and subscribed the same for the uses and purposes therein mentioned and set forth.

WITNESS my hand and official seal in the County and State aforesaid this 27 day of MAY, 1996.



Charles M. Milligan  
MY COMMISSION # CC494236 EXPIRES  
December 13, 1999  
BONDED THRU TROY FAIN INSURANCE, INC.

*Charles M. Milligan*  
\_\_\_\_\_  
Notary Public  
Commission: \_\_\_\_\_  
Expires: \_\_\_\_\_

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

FILED

96 JUN 24 PM 12:51

HAVING been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Signature

C. M. Milligan  
(Resident Agent)

Date

6/21/96

STATE OF FLORIDA

COUNTY OF MONROE

The foregoing instrument was acknowledged before me this 21 day of JUNE, 1996, by CHARLES M. MILLIGAN, who is (or are) personally known to me or who has produced Drivers License (form of Identification) as identification and who ~~did~~ (did not) take an oath and she executed the Acceptance of Appointment as Registered Agent.

WITNESS my hand and official seal in the County and State aforesaid this 21 day of JUNE, 1996.

Michael J. Corrigan  
Notary Public

Commission:

Expires:

