# CAPITAL CONNECTION, INC. ne: LAK Buildows, Zuc 417 E. Vlighila St., Suite 1, Tallahassee, Ft. 32301, (904)224-8870 Mailing Address: Post Office Box 10349, Tallabassee, FL 32302 TOLL FRIE No. 1-800-142-8062 PAX (904) 222-1222

FIRMADDRESS	
Sorvica: Top Priority One Dny Servic	Regular Two Day Service
To us via	Roturn vla
Matter No.:	Expross Mall No.
State Fee \$ 10 12	Our \$

REQUEST TAKEN	CONFIRMED	APPROVED
DATE 10/28		
TIME		CK No.
вү		<u></u>
	_	

-	o.c. rea.	DISHUNSED
Capital Express w		
Art. of Ing. File		
Corp. Macord Santah		
Ltd. Partnoratilp File	ار مستومه	<u> </u>
Furnign Corp. File	<u> </u>	19
( ) Carl. Copy(s)		(1) (2)
,,,	(5)	المات المات
Ait, of Amand, Fila	~	, ., 
Dissolution/Withdrawat		<u> </u>
O U 8·		
Ficilious Name File		
Name fleservation		
Annual Report/Releatatement		
non Annu Callida III 1 1 1	: کیتریت	<del>1</del> -
Document Filling -10/28/9	16==UIU12:==U	113 VT CH
****122	1.5U 未未用率1.6	22.50
Corporata Klt		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC t or 3 File		
UCC 11 Sonich		
UCC 11 Retrievat		
File No.'s, Copies		
Courier Service		
Shipping/Liandling	<del></del>	
Phone ( )		
Top Priority		
Express Mall Prep.		
FAX ( ) pgs.		
UBTOTALS		
rer	s	
FEE	***	
DISBURSED	s	
CISDAHSCA		
SURCHARGE	\$	
*		
TAX on corporate supplies	\$	
	1.	
SUBTOTAL	\$	<del></del>
	1.	
PREPAID	\$	
	1.	
BALANCE DUE	<u> </u>	

Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DAYE 1 1/2% per month on Past Dua Amounts Pest 30 Days, 18% per Annum.

Pest 30 Days, 18% per Annum.

1 2 8 1996

THANK YOU from

#### ARTICLES OF INCORPORATION

of

# L & K BUILDERS, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

# ARTICLE I - CORPORATE NAME

The name of the corporation is:

### L & K BUILDERS, INC.

#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

#### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue <u>One Thousand</u> (1000) shares .001 Dollar(s) (\$ .001 ) par value Common Stock, which shall be designated "Common Shares."

# ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

ANN T. FRANK
2124 Airport Road South
Suite 102
Naples, FL 34112

The principal office, if known, or the mailing address of the corporation is:

4945 Barcelona Circle Naples, Florida 34112 Stock States

# ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have  $\underline{two}$  (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall nover be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

> Larry Snyder 4945 Barcelona Circle Naples, FL 34112

> Kevin Snyder 4945 Barcelona Circle Naples, FL 34112

#### ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

> PETER B. FRANK 2124 Airport Road South Suite 102 Naples, FL 34112

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 29 day of October, 1996.

STATE OF FLORIDA COUNTY OF COLLIER

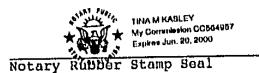
Before me a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

It B. On

X Personally known to me Form of Identification

PETER B. FRANK

Known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that they executed these Articles of Incorporation, that I relied upon the form X of identification of the above named person as indicated opposite each name, and that an oath was taken.



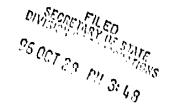
Witness my hand and official seal in the county and State last aforesaid this and day of October , 1996.

Notary Signature
Tina M. Kasley

Printed Notary Signature

# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT



OF

# L & K BUILDERS, INC.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at

2124 Airport Road South Suite 102 Naples, Florida 34112

has named

Ann T. Frank, Esquire

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

### **ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

ANN T. FRANK, P.A.

Altomov at Law 2124 Airport - Pulling Hill S - Scite 102 Naplos - Florida (4112

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

l (Có	poration Name) (Documen	ī #)
2	poration Name) (Documen	TW)
3	poration Name) (Documen	(#)
4	poration Name) (Documen	
☐ Walk in	, ,	Certified Copy
Mail out	Will wait Photocopy	Certificate of Status
 NEW FILINGS	AMENDMENTS	
Profit	Amendment	rumana≥9287500 -\n/24/970\030017 +****35.00 +****35.00
NonProfit	Resignation of R.A., Officer/ Director	**************************************
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	7
Other	Merger	97 GCT 24 PH12: 48
 <del></del>		
 OTHER FILINGS	REGISTRATION/	17
 Annual Report	QUALIFICATION	P <sub>H</sub>
 Fictitious Name	Foreign	12: (
Name Reservation	Limited Partnership	တ် ု
	Reinstatement	
	Trademark	
	Other	

Examiner's Initials

# Florida Department of State, Sandra B. Mortham, Secretary of State

# OFFICER / DIRECTOR RESIGNATION

1. Kevin Snyder , hereby resign as Director (Title)	
of L& K Builders, Inc. (Name of Corporation)	
a corporation organized under the laws of the State of Florida	
and affirm that the corporation has been notified in writing of the resignation.	
Kovin Sunda by Kom & Stry Oan ATTOKNEY-IN-1 G (Signature of resigning officer/director)	FACT
5755724	<b>.</b>
FILING FEE IS \$35.00	

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

#### SPECIAL POWER OF ATTORNEY

, Kevin Keith Snyder, residing at OIH5764.	44525 Carbon Hill Rd., Nelsonville,
	nt Larry Fugene Snyder of 4945
	,USA,asmyAttorney-In-
fact ("Agent").	

My Agent shall have full power and authority to act on my behalf but only to the extent permitted by this Special Power of Attorney. My Agent's powers shall include the power to: Sign for me for any matters pursuant to forming a business corporation, and for any matters concerning said corporation.

I hereby grant to my Agent the full right, power, and authority to do every act, deed, and thing necessary or advisable to be done regarding the above powers, as fully as I could do if personally present and acting.

Any power or authority granted to my Agent under this document shall be limited to the extent necessary to prevent this Power of Attorney from causing (i) my income to be taxable to my Agent, (ii) my assets to be subject to a general power of appointment by my Agent, and (iii) my Agent to have any incidents of ownership with respect to any life insurance policies that I may own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good faith. However, my Agent shall be liable for willful misconduct or the failure to act in good faith while acting under the authority of this Power of Attorney.

My Agent shall not be entitled to any compensation, during my lifetime or upon my death, for any services provided as my Agent. My Agent shall be entitled to reimbursement of all reasonable expenses incurred in connection with this Power of Attorney.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent, if I so request or If such a request is made by any authorized personal representative or fiduciary acting on my behalf.

This Power of Attorney shall become effective immediately. This Power of Attorney shall continue effective until my death. This Power of Attorney may be revoked by me at any time by providing written notice to my Agent.

Dated_	October	21	_,19 <u>96_</u> at	no wonir Cle	·····
	<u>ski</u>	,	USA.		
Kessin	Keith.	Snurtes			
Kevin k	Keith Sny	der			
	<del>ommonw</del> ⁄ <del>Clty</del> of		OHIO ATHENS	·····	
This in:	strument <i>ToBER</i>	was ackno , 19 <i>_<b>96_</b>_</i> 1	wledged befo by Kevin <del>Kevi</del>	ore me on this A A Keith Snyder.	day of
 Notary	Public		. Toylor	·	
		RIO RITA TAYLOR NOTARY PUBLIC, S MY COM. EXP.	1050 000 17/0/2000		
•	nd Rank)	volvas	5/10/200		-