P96000096415

TRANSMITTAL LETTER

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

SUBJECT: American Pipe Works Inc.

(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 70.00

SDDDD2D11155—CI1/21/96--01051--003

*****70.00 *****70.00

Name

G634 PICKETT VILLE An

Address

Tage severele for 32254

City, State, 8 Zip

(404) 786-9100



Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

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AMERICAN PIPE WORKS 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 1 NAME

The name of the corporation shall be:

AMERICAN PIRE WOLKS lave

ARTICLE II PRINCIPAL OFFICE

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

5634 PICKETT VILLE RO JACKSONVILLE FZ. 32254

ARTICLE III CAPITAL STOCK

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

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JOE CRUM 6634 PICKETT VILLE RD JACKSONILLE FL. 32254

ANTICLE V INCORPORATOR(S)

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

J. JOSEPH CRUM P. 6634 PICKERTI VILLE NO JACKSONVILLE FL. 32254

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

// day of November 19 96

Signature/Title

Signature/Title

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CERTIFICATE OF DESIGNATION BEGISTERED AGENT/BEGISTERED 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 corporation is:	AMERICAN PIPE	WORKS IN
? The name and address of the reg	•	SECULIAN SECULIA
6634 PIC. (P.O. BOX NO	KETT VILLE NO	
	VILLE FC. 32254 STATE/ZIP)	NOT O.
i ·	SIGNATURE (COPPOSATE OILI TITLE 11-15-96	Cer)
HAVING BEEN NAMED AS REGIST PROCESS FOR THE ABOVE STATED THIS CERTIFICATE, I HEREBY ACCE AND AGREE TO ACT IN THIS CAPAC PROVISIONS OF ALL STATUTES REI FORMANCE OF MY DUTIES, AND IN HONS OF MY POSITION AS REGISTE	I CORPORATION AT THE PLACE PT THE APPOINTMENT AS REC CITY. I FURTHER AGREE TO CO LATING TO THE PROPER AND AM FAMILIAR WITH AND ACCE	E DESIGNATED IN SISTERED AGENT OMPLY WITH THE COMPLETE PER-
	SIGNATURE	

REGISTERED AGENT FILING FEE: \$35.00