P970C

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

000002249140---07/28797--0095--004 ******?[],[][] ******?[],[][]

(Proposed corporate name - must include suffix Enclosed is an original and one (1) copy of the articles of incorporation and a check for: **V** \$70.∞ \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee & Certified Copy Filing Fee, Certified Copy & Certificate & Certificate FROM: 352-489-2526

AUTHORIZATION BY PHONE TO

CORRECT

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

Daytime Telephone number

T.M. -7/29/9

DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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 | NAME

The name of the corporation shall be:

West Marion Welding, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10045 SW 183rd Ct Dunnellon, FL 3443Z

ARTICLE III SHARES

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

100 Shares common Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRES

The name and address of the initial registered agent is:

Sharon A. Head 10045 Sw 183rd Ct. Dunnellon, FL 3443Z

ARTICLE V INCORPORATOR(S)

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

William B. Head, JR. 10045 S.W. 18379 Ct Dunnellon, FC 34432

The undersigned inc	orporator(s)	has(have) execut	ed these Articles o	f Incorporation this
215+	day of	July	19 97	
	/1\ iM.:.	A B. Ofent	· · · · · · · · · · · · · · · · · · ·	
<u> </u>	_(N)_(N)_AAA	Synature	· · · · · · · · · · · · · · · · · · ·	
		Signature		·

Articles of Incorporation

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: West Marion Welding	, Inc.					
2. The name and address of the registered agent and office is:						
Sharon A. Head						
(Name)						
10045 S.W. 183rd Ct.						
(P.O. Box not acceptable)						
Dunnellon, FL 34432	protection and a	. ,				
(City/State/Zip)						
Having been named as registered agent and to accept service of process for above stated corporation at the place designated in this certificate, I hereby the appointment as registered agent and agree to act in this capacity. I furt to comply with the provisions of all statutes relating to the proper and compressed in the proper and compressed in the proper and compressed in the obligations of my as registered agent.	or the y accept her agree plete perfor- y position					
Sharon a. Head 7/21/97	97 JUL 28 YALLAHABI					
•	PH 12: 2:	J				