P97000106618



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

SUBJECT:	Donel Davide (Proposed corpor	son Constru ate name - must include s	ection Inc	
		•	30000237 -12/19/97 ******70.00	-01022001
Enclosed is an origina	al and one(1) copy of the articles	of incorporation and	a check for :	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL C	OPY REQUIRED	
FROM:	Janice J. Name (Pr	Davidson inted or typed) Hwy 0605		RECI
	DeFuniak Spo	Address 1 13. FL 30 State & Zip	2433 RAS	EIVED
	904 834- Daytime Te	-2017 elephone number		

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

1219-97



ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be: Done! Davidson Construction Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: Unice J. Davidson 6455 County Hwy 0605 DeFuniak Spgs FL 32433
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1 Shares
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are: Janice J. Davidson
6455 County Hay 0605
DeFuniak Spgs., Fl 32433
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are: Janice J Davidson
6455 County Hwy 0605 DeFuniak Spgs, FL 3243
Signature/Incorporator A 19 97 Date
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

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 Registered Agent

Date