TRAISMIT AL LETTER 357

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

000002440080--5 -02/25/98--01016--005 ****122.50 ****122.50

SUBJECT:	Fullwood	SUBCONTRACTING	INC.
	(Proposed corporate name - must include suffix)		

Enclosed is an original 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 CO	PY REQUIRED	
FROM:	DARRICK	FV//wood (Printed or typed)	98 SECH TALL	
	11015 WING	· · · · · · · · · · · · · · · · · · ·	FEB 25 F	7
	TAMPA F	2 33624 y, State & Zip	M 2: 31	
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NOTE: Please provide the original and one copy of the articles.

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.

ARTICLE I NAME

The name of the corporation shall be:

FULLWOOD SUBCONTRACTING, INC.

ARTICLE II PRINCIPAL OFFICE

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

1015 WINGAYE DV TAMPA AL 33624

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

DARRICK FULLIONED

1015 WINGATE DV
TAMPA PL 33624
FICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Darrick Fullwood 11015 Wingate Dr. Tampa, FL 33629

Signature/Incorporator

2/17/98 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

5/v/98

Date