P98 BANSM	TALLETTER 7	181
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	00000224 -02/16/ ******7	1213504 9801068009 8.75 *****78.75
	NCRETE, & MOBILE HOME SET- name - must include suffix)	UP
Enclosed is an original and one (1) co for : \$70.00 X \$78.75 Filing Fee Filing Fee & Certificate	opy of the articles of incorporation a\$122.50\$131.25Filing FeeFiling Fee,& Certified CopyCertified Copy& CertificateAdditional Copy Required	FILE 98 FEB 26 PM SECRETARY OF TALLAHASSEE, F
34949 TRAN DADE CITY,	(printed or typed) IQUIVIEW LN Address FL 33523	II2: 36 LORIDA
1 - 800 - 330 - Daytime	Telephone number	-11-36
T COTT: aF4.4 NOTE: Please provide the o	briginal and one copy of the a $G_{\alpha}^{\alpha} = \int_{\alpha}^{\alpha} \Psi^{\alpha}$	98 - 3436 articles.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 16, 1998

HAROLD L. WAGNER 34949 TRANQUIVIEW LN DADE CITY, FL 33523

SUBJECT: H.W. ALUMINUM, CONCRETE, & MOBILE HOME SET-UP Ref. Number: W98000003436

We have received your document for H.W. ALUMINUM, CONCRETE, & MOBILE HOME SET-UP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The name of the entity must be identical throughout the document.

The registered agent designated in your document is not an active entity according to our records. Please reinstate this entity (call (850) 487-6059 for information) or designate another entity that is active according to our records.

REGARDING THE NOTE DIRECTLY_ABOVE, PLEASE JUST CHANGE THE REGISTERED AGENT TO HAROLD WAGNER AS HE IS WHO HAS SIGNED THE AGENT ACCEPTANCE.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6926.

Tracy Augsburger Document Specialist

Letter Number: 298A00008832

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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 I NAME

The name of the corporation shall be:

H.W. ALUMINUM, CONCRETE, & MOBILE HOME SET-UB, INC.

ARTICLE II PRINCIPAL OFFICE

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

P.0. BOX 2158 DADE CITY, FL 33526



ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

-				1	-	≝HAROI	LD WAGNER	
	 -		inter en la companya de la companya Nome	· ····			9 Tranquiv	
	 -	··	· .			Dade	City,Fl	33523

ARTICLE V INCORPORATOR(S) See instructions for officers/directors

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

HAROLD L. WAGNER 34949 TRANQUIVIEW LN DADE CITY, FL 33523

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

11 day of Februaky 19_48 Signature Signature Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED 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:

1. W. HLaminin

2. The name and address of the registered agent and office is:

HAROLD WAGNER 34949 Tranquiview Ln T ACCEPTABLE) P.O. Box or Mail Drot Dade City, Fl 33523

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)

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DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FI