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# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839

Fax Number : (305)599-0839

FLORIDA PROFIT CORPORATION OR P.A.

RIVERA CONCRETE INC.

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SECRETAR FOR STATE
TALLAMASSEE, FLORIDA

ARTICLES OF INCORPORATION OF

RIVERA CONCRETE INC.

ARTICLE I NAME

The name of the corporation shall be: RIVERA CONCRETE INC.

ARTICLE II PRINCIPAL OFFICE

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

6907 SHANNON DRIVE

FORT PIERCE, FL 34951

ARTICLE III CAPITAL STOCK

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

500 (FIVE HUNDRED) SHARES

Prepared by: Triple Check Income Tax Service 2506 Delaware Ave Ft Pierce FL 34947 (561)461-5987 ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ABIGAIL RIVERA

6907 SHANNON DRIVE

FORT PIERCE, FL 34951

#### ARTICLE V INCORPORATOR

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

ABIGAIL RIVERA

6907 SHANNON DRIVE

FORT PIERCE, FL 34951

The undersigned has executed these Articles of Incorporation this 14th day of April 1999.

ABIGAIL RIVERA, Incorporator

### CERTIFICATE OF DESIGNATION

## 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.

<ol> <li>The name of the corporation is:</li> </ol>			
RIVERA CONCRETE INC.			
2. The name and address of the registered agen office is: ABIGAIL RIVERA	- it and		
6907 SHANNON DRIVE	-		-
FORT PIERCE, PL 34951	e=	•	
Signature: Local Fuera Title:			
Date: 4/14/99			
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACSERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCESS APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISOR 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	AT THE THIS SIO <b>NS</b>		
signature: Oldique Sware			
signature: (Roigant Studio)  Date: 4/14/99	SECKETALL OF STATE TALLAHASSEE, FLORIDA	99 APR 22 AM 8:	
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