

**HINSON
BUILDING
CORPORATION**

5435 9TH STREET N.
ST. PETERSBURG, FL 33703
PHONE (813) 528-0181 • FAX (813) 528-4454
STATE LICENSE #CGC044505

09000052294 LETTER OF TRANSMITTAL

DATE	6-3-99	JOB NO.
ATTENTION:	Division of Corporations	
RE:	Certificate of Domestication	

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

500002897195--5
-06/07/99--01154--001
***128.75 ***128.75

WE ARE SENDING YOU ☒ Attached ☐ Under Separate cover via CERTIFIED MAIL the following items: Z 045 626 070

☐ Shop Drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications

☐ Copy of Letter ☐ Change Order ☒ Other

COPIES	DATE	NO.	DESCRIPTION
1			Completed Certificate of Domestication
1			Completed Original Articles of Incorporation
1			Completed Copy of Georgia Articles of Incorporation
1			Unanimous Consent of The Board of Directors of Hinson Building Corporation to the Adoption of Certain Actions & Resolutions in Lieu of a Special Meeting
1			Check No. 048079 in the amt. of \$128.75 to cover fees for:
			Cert. of Domes. \$50.00 & Articles of Inc. & Certifying \$78.75

THESE ARE TRANSMITTED as checked below:

- | | | |
|--|---|---|
| <input type="checkbox"/> For Approval | <input type="checkbox"/> Approved as Submitted | <input type="checkbox"/> Resubmit ___ Copies for Approval |
| <input checked="" type="checkbox"/> For your Use | <input type="checkbox"/> Approved as Noted | <input type="checkbox"/> Submit ___ Copies for Distribution |
| <input type="checkbox"/> As Requested | <input type="checkbox"/> Returned for Corrections | <input type="checkbox"/> Return ___ Corrected Prints |
| <input type="checkbox"/> For Review and Comment | <input type="checkbox"/> _____ | |
| <input type="checkbox"/> FOR BIDS DUE _____ 19 _____ | <input type="checkbox"/> PRINTS RETURNED AFTER LOAN TO US | |

REMARKS Please contact the undersigned if additional information is required. Thank you.

FILED
1999 JUN -7 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COPY TO _____

SIGNED: Lisa Biglin

Lisa Biglin, Office Manager

Florida Department of State

CERTIFICATE OF DOMESTICATION

The undersigned, John M. Hinson, Chief Executive Officer,
(Name) (Title)

of Hinson Building Corporation a foreign Corporation,
(Corporation Name)

in accordance with Florida Statutes, section 607.1801 does hereby certify:

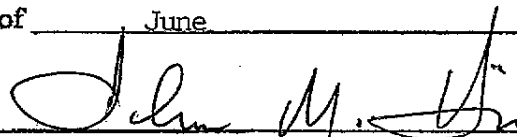
1. The date on which corporation was first formed was November 22, 19 89.
2. The jurisdiction where the above named corporations was first formed, incorporated, or otherwise came into being was Georgia.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Hinson Building Corporation.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to ss. 607.0202 and 607.0401 with this certificate is Hinson Building Corporation.
5. The jurisdiction that constituted the seat, siege, social principal place of business or central administration of the corporation, or any other equivalent thereto under applicable law immediately prior to the filing of the Certificate of Domestication was

Macon, Georgia

I am CEO, of Hinson Building Corporation

and am authorized to sign this certificate of Domestication on behalf of the corporation and have done

so this the 1st day of June, 19 99



(Authorized Signature)
John M. Hinson

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

INHS53 (6/96)

FILED
1999 JUN -7 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607, F.S., Florida Profit

ARTICLE I NAME

The name of the corporation shall be:

Hinson Building Corporation

ARTICLE II PRINCIPLE OFFICE

The principle place of business/mailling address is:

5435 9th Street, North
St. Petersburg FL 33703

ARTICLE III SHARES

The number of shares of stock is:

1,000 - issued

10,000 - authorized

ARTICLE IV OFFICERS/DIRECTORS (OPTIONAL)

The name(s) and address(es):

John M. Hinson, CEO, 5435 9th St N, St Petersburg FL 33703
John L. Wallace/Pres, 5435 9th St N, St Petersburg FL 33703
David J. Pfeiffer/VP, 5435 9th St N, St Petersburg FL 33703

ARTICLE V REGISTERED AGENT

The name and Florida street address of the registered agent is:


John L. Wallace, 5435 9th St N, St Petersburg FL 33703

ARTICLE VI INCORPORATOR

The name and address of the Incorporator is:

John M. Hinson, 5435 9th St N, St. Petersburg FL 33703


I hereby accept the appointment as Registered Agent & agree to act in this capacity.



Signature/Registered Agent
John L. Wallace

1 June 1999

Date



Signature/Incorporator
John M. Hinson

1 June 1999

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA