

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

500003011115--2 -10/11/99-01079--006 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Masony Diversified Services
(Proposed corporate name - must include suffix)

au is an origina	aranu one( i) copy or the article	esor incorporation and a c	theck for:		
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of, Status Y REQUIRED	F 99 0CT	
FROM:	DANER A. Name (Pr	Panaccion (	——————————————————————————————————————	ILED	
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	SAFETY City,	Harbor Flatate & Zip	<u> 34695</u>	معاسف وورد	
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NOTE: Please provide the original and one copy of the articles.

PH 10/14/55-

# **Articles of Incorporation**

FILED 99 OCT | | PM | 2: | |

SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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 Masonry Diversified Services, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 405 Bayshore Drive South, Safety Harbor, FL 34695

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500.

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Daner Panaccione, 405 Bayshore Drive South, Safety Harbor, FL 34695

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Daner Panaccione, 405 Bayshore Drive South, Safety Harbor, FL 34695

Signature of Incorporator

Date

Having been named as registered agent and to accept service of process of 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 statures 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 of Incorporator

Date