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TRANSMITTAL LETTER

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

SUBJECT: Wakulla	a Carpet Brokers Inc		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
2 \$70.00	□ \$78.75	\$78,75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
, imig i oo	& Certificate of Status	& Certified Copy	Certified Cop
		l common copy	& Certificate
			Status
		ADDITIONAL COPY REQUIRED	
FROM: Cu	rtis Daniels		
FROM.	Name	(Printed or typed)	
		,	
	53 P A Sanders Rd		
		Address	
	Sopchoppy FL 32358		
		, State & Zip	
		2 wa waik	
	850-962-3652		
		Telephone number	•

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

05 MAY -9 AN 11:09

NAME

The name of the corporation shall be:

Wakulla Carpet Brokers Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 53 P A Sanders Rd Sopchoppy FL 32358

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Flooring Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Curtis Daniels, President 53 P A Sanders Rd Sopchoppy FL 32358

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Wanda Daniels 53 P A Sanders Rd Sopchoppy FL 32358

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Curtis Daniels 53 P A Sanders Rd Sopchoppy FL 32358

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

5-4-05

Signature/Incorporator