

P05000106100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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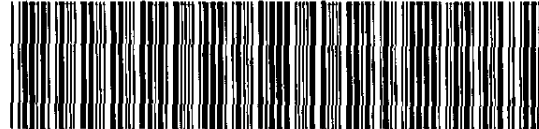
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: ABSOLUTE BEST FLOORING INSTALLATION, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: WILLIAM CRAIG ODOM
Name (Printed or typed)

1525 W. TENNESSEE STREET, #31
Address

TALLAHASSEE, FLORIDA - 32304
City, State & Zip

865-742-4016
Daytime 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)

ARTICLE I NAME

The name of the corporation shall be:

ABSOLUTE BEST FLOORING INSTALLATION, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**1525 W. TENNESSEE STREET, #31
TALLAHASSEE, FLORIDA - 32304**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSTALLATION OF CARPET, WOOD, TILE, VINYL

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**WILLIAM CRAIG ODOM C.E.O.
1525 W. TENNESSEE STREET, #31
TALLAHASSEE, FLORIDA - 32304**

ARTICLE VI REGISTERED AGENT

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

**WILLIAM CRAIG ODOM
1525 W. TENNESSEE STREET #31
TALLAHASSEE, FLORIDA - 32304**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**WILLIAM CRAIG ODOM
1525 W. TENNESSEE STREET, #31
TALLAHASSEE, FLORIDA - 32304**

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

8-1-05
Date


Signature/Incorporator

8-1-05
Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA