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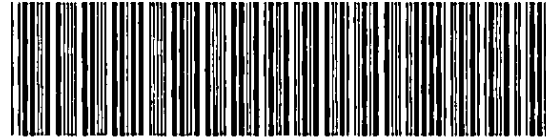
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17 DEC -1 PM 3:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

SUBJECT: V & J FLOORING CORP.,  
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: V & J FLOORING CORPORATION  
Name (Printed or typed)

460 W. OAK RIDGE RD APT # 212  
Address

ORLANDO, FLORIDA 32809  
City, State & Zip

407-269-9691 \*\*\* 321-217-6745  
Daytime Telephone number

JOEL198319@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

**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: V & J FLOORING CORPORATION.,

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

460 W. OAK RIDGE RD APT # 212

460 W. OAK RIDGE RD APT # 212

ORLANDO, FL 32809

ORLANDO, FL 32809

407-269-9691

407-269-9691

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: WE INSTALL

LAMINATE, CARPET, VINYL, VCT, BASE BOARD

COMERCIAL AND RESIDENTIAL

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TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 2

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: VILMA CRISTELA DUARTE ALEMAN - PRESIDENT Name and Title: \_\_\_\_\_

Address: 460 W. OAK RIDGE RD APT # 212 Address: \_\_\_\_\_

ORLANDO, FL 32809

321-217-6745

Name and Title: JOEL HERNADEZ ROSAS VICE-PRESIDENT Name and Title: \_\_\_\_\_

Address: 460 W. OAK RIDGE RD APT # 212 Address: \_\_\_\_\_

ORLANDO, FL 32809

407-269-9691

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: VILMA CRISTELA DUARTE ALEMAN  
 Address: 460 W. OAK RIDGE RD APT # 212  
ORLANDO, FL 32809

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: VILMA CRISTELA DUARTE ALEMAN  
 Address: 460 W. OAK RIDGE RD APT # 212  
ORLANDO, FL 32809

*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*

*Vilma Duarte* 11/27/2017  
 Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

*Vilma Duarte* 11/27/2017  
 Required Signature/Incorporator Date