

P23000068895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

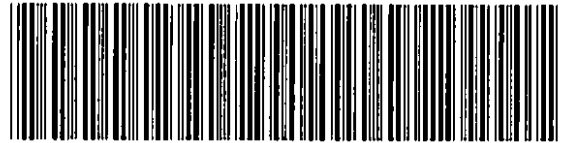
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

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

SUBJECT: Carpet Alley Incorporated
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

<input type="checkbox"/> \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
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ADDITIONAL COPY REQUIRED

FROM: Frank Milea
Name (Printed or typed)

6961 Exline Rd
Address

Jacksonville Florida 32222
City, State & Zip

904-300-3476
Daytime Telephone number

pattybkb@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: Carpet Alley Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

6961 Exline Rd
Jacksonville Fla.
32222

Mailing address, if different is:

6961 Exline Road
Jacksonville Fla. 32222

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To make a profit and for well being for stock holders, heads of corporation, employees and clients selling Carpet, tile, lenoleum, carpentry painting, wallpaper, home + business accessories. and and part of the installation process.

ARTICLE IV SHARES

The number of shares of stock is: 1 million

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Frank Milea Pres.
Address: 6961 Exline Rd
Jacksonville Fla
32222

Name and Title: Helen Milea VP:
Address: 465 Roscoe Blvd
Ext. Ponte Vedra
Beach Fla 32082

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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MAY 8 1998
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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: Frank Milco
Address: 6961 Exline Road
Jax Fla 32222

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Frank Milco
Address: 6961 Exline Rd
Jax Fla 32222

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Frank Milco
Required Signature/Registered Agent

9/18/2023
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.

Frank Milco
Required Signature/Incorporator

Date 9/18/2023