## P1100009488a

(D)				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
· .				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Sasmose Shar, Name)				
(Daguerant Murchar)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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JIVISION OF CORFURNIS.

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## **COVER LETTER**

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

SUBJECT: Masterpiece Flooring, I	nc.			
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)		
Enclosed are an original and one (1) copy of the articles \$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL C	OPY REQUIRED		
			J	
FROM: Derek Striker Name	(Printed or typed)			
3199 US Hwy 441/27			701	<u></u>
A	ddress		100	SCRE
Fruitland Park, FL 3473	1 State & Zip		Ž011 OCT 31 P	OF STATE OF THE PROPERTY OF TH
352-787-4036  Daytime Te	elephone number		PH 2: 03	
masterpiecefloors@centu E-mail address: (to be used	urylink.net	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)

SECRETARY OF STAIL

Date

The name of the corporation shall be:  Masterpiece Floors, Inc.		•	วเข้ารถังหังคำตัดหักสังหังให้ <b>2011 OCT 3 I PM 2: 0</b> 3		
		••			
ARTICLE II	PRINCIPAL OFFICE		2311 001 01	111 2-0	
	Principal street address	Mailin	g address, if different is:		
	3199 US Hwy 441/27				
Ē	ruitland Park, FL 34731		<u> </u>	·	
-		· · · · · · · · · · · · · · · · · · ·			
ARTICLE III The purpose for w	<b>PURPOSE</b> hich the corporation is organized is:				
	awful business.				
ARTICLE IV	SHARES				
The number of shar	res of stock is: 100				
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	RS			
Name and Ti	itle: Derek Striker, President	Name and Title:			
Address:	3199 US Hwy 441/27	Address:	<del></del>		
	Fruitland Park, FL 34731		<del>-</del> · · · · · · · · · · · · · · · · · · ·		
Nome and Ti	:41			_	
Address:	itle:				
Address.					
Name and Ti	itle:	Name and Title:			
Address:		Address:			
		·			
ARTICLE VI	REGISTERED AGENT				
	rida street address (P.O. Box NOT acceptable) o	f the registered agent is:			
Name:	Derek Striker	_			
Address:	3199 US Hwy 441/27	_			
	Fruitland Park, FL 34731	_			
	INCORPORATOR				
	<u>lress</u> of the Incorporator is:				
Name:	Derek Striker	_			
Address:	3199 US Hwy 441/27	<del></del>			
	Fruitland Park, FL 34731	<del>-</del>			
	ed as registered agent to accept service of proces			esignated in	
this certificate, I an	n familiar with and accept the appointment as reg	gistered agent and agree t	o act in this capacity		
()			10/24/11		
	Required Signature/Registered Agent	<del></del>	Date		
I submit this docu	ment and affirm that the facts stated herein are	true I am aware that t	he false information ou	hmittad in a	
document to the De	epartment of State constitutes a third degree felon	y as provided for in s.81?	7.155, F.S.	ज्ञासस्य १४ ४	
$\mathcal{A}$	1/1/				
1	(1)		10/24/11		

Required Signature/Incorporator