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TRANSMITTAL LETTER

TO: Registration Section Division of Corpo	orations				
SUBJECT:	FLOO	<u>RC</u>	ON INC	<u></u>	
	(Name of	corpoi	ration - must include suffix	,	
Dear Sir or Madam:					
	, and check are sub		for Authorization to Trans to register the above refere		
Please return all correspo	ndence concerning	this m	atter to the following:		
CA	HARLIE	D.	TACINELLI e of Person)		Q 10
		(Nam	e of Person)		The state of
	FLOG	PC	ON INC.	,	
			DN INC. /Company)		75.50 3
P.O. Box	117	•	Address) PRK 1251 ate and Zip code)	s 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
		(<i>I</i>	Address)		OF '
BILLING	, NEW	40	RK 1251	0	95
	(1	City/St	ate and Zip code)		-
For further information co	oncerning this matt	er, plea	ase call:		
CHAPLIE TH (Name of Person	CINEUI at	(<u>9</u> 1	14) 475 – 6 rea Code & Daytime Telep	2// <i>O</i> hone Numb	 er)
STREET ADDRESS: Registration Section			MAILING ADDRE Registration Section	SS:	
Division of Corporations			Division of Corporat	ions	
409 E. Gaines St.			P.O. Box 6327		-
Tallahassee, FL 32399			Tallahassee, FL 323	14	
Enclosed is a check for the	e following amoun	t:		/	
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fo Certificate of S		□ \$78.75 Filing Fee & Certified Copy		io Filing Fee, ificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Name of corporation; must include the word "INCORPORA words or abbreviations of like import in language as will clear	
(Name of corporation; must include the word "INCORPORA	ATED", "COMPANY", "CORPORATION" or
words or abbreviations of like import in language as will clea	arly indicate that it is a corporation instead of a
natural person or partnership if not so contained in the name	at present.)
NEW YORK	3.
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
1/24/1007	Para san
(Date of incorporation)	Duration: Year come will coace to exist or "narnetual")
(Date of incorporation)	(Duranon: Tear corp. will cease to exist of perpendar)
UDON QUALIFICATION	not transacted business in Florida, insert "upon qualification.")
•	501, 607.1502 and 817.155, F.S.)
. 1531 ROUTE 82 HOPSWEL	4 Juc. N.Y. 12533
(Principal office a	ddress)
P.O. Box 117 BILLING. (Current mailing a	S N-1 12310
(Curtin maning a	address)
1/1/20 10 10 10 10 10 10 10 10 10 10 10 10 10	and a dome of the second of the
HARDWOOD FLOORING 11	
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)
Name and street address of Florida registered agen	t: (P.O. Box or Mail Drop Box NOT acceptable)
Name: PETGR MAZZUCA	
m 7175 T 4	
ffice Address: 5170 Immo Cour	Zana in the second se
SARASOTA	Florida 24/2 3 3
SARASOTA (City)	(Zin code)
(4.7)	(mark occus)
0. Registered agent's acceptance:	
laving been named as registered agent and to accept se	ervice of process for the above stated corporation at the place

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and dusiness addresses of officers and/or directors:
A. DIRECTORS
Chairman: CHARLIE TACINELL
Address: 2167 FOUTE 82
LAGIRANGBUILLE N.Y. 12540
Vice Chairman: LINDA TACINSLIV
Vice Chairman: LINDA TACINSLLY Address: 2167 POUTE 87
Address: 2167 POUTE 82 LAGRANGEVILLE N-4- 12540 Director:
Director:
Address:
Director:
Address:
B. OFFICERS
President: CHARLIE TACINELLI
Address: 2167 ROUTE 82
LAGIRANGIEVILLE, NEW YORK 12540
Vice President:
Address: 5605 GRANADA # 258
SARASOTA FLORIDA 34231
Secretary: LINDA TACINELLI
Address: 2167 ROUTE 82 LAGIRANGEVILLE NY. 12540
Treasurer: MARIA RAIN both
Address:
NOTE: If necessary, you may attach an addendard to the application listing additional officers and/or directors.
13. Attit Jacob C
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. CHARLIB TACINELLI - PRESIDENT
(Typed or printed name and capacity of person signing application)

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of FLOORCON INC. was filed on 01/24/1997, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Biennial Statement is past due.

Witness my hand and the official seal of the Department of State at the City of Albany, this 16th day of May stwo thousand and three.

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