POOD PRASMITALETTER 4 203

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

SUBJECT:	(Proposed corpo	Ty FlooR rate name - must include su	(overice	a Ane					
000031303100 -02/10/0001001009 *****50.00									
Enclosed is an original and one(1) copy of the articles of incorporation and a check ******28.75 ******28.75									
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED						
OF FECEIVED OF FEB-9 PM 4: 00 OF FAMILY OF STATE OF CORPORATIONS TALLAHASSEE, FLORIDA :W	6409 Set P./ A TALLAHASSEL City, S 509-64	inted or typed) Of Trail ddress Horida 32 State & Zip	TALLAHASSEE, FLOHIUM	APPROVED OF STATE					

NOTE: Please provide the original and one copy of the articles.

ANJA

ARTICLES OF INCORPORATION

ARTICLE I NAME
The name of the corporation shall be:

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Capital City Floor C	overing	INC			
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing 6409 Set pilot Trail	address of this	corporation shall b SSeと, 干しる	e: Z <i>30</i> 8		
ARTICLE III SHARES The number of shares of stock that this corp	poration is autho	orized to have outst	anding at any one tin	ne is:	
ARTICLE IV INITIAL REGISTE The name and Florida street address of the in Robert E. Estes 6409 Set Pilot Trail Tall, Fl 32308 ARTICLE V INCORPORATOR The name and address of the incorporator in Robert E. Estes 6409 Set Pilot Trail Tall, Fl 32308	nitial registered to these Articles 1009 Jef 1	agent are: s of Incorporation a Byrcl clot Top/	TALLAHAS	00 FEB -9 PH 4: 09	APTANOVED
Signature/Incorporator	TAII, FI	32308	<u> </u>		·

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date