

P000000060933

TRANSMITTAL LETTER

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

FILED
00 JUN 19 PM 5:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Subject: Carpet Installation Work Room, Inc.

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

<input checked="" type="checkbox"/> \$ 70.00 Filing Fee	<input type="checkbox"/> \$ 122.50 Filing Fee & Certified Copy (additional copy required)
<input type="checkbox"/> \$ 78.75 Filing Fee & Certificate	<input type="checkbox"/> \$ 131.25 Filing Fee, Certified Copy & Certificate (additional copy required)

From Tomas Cruz Jr.
11825 71st Circle N
Largo, FL 33773

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*****70.00 *****70.00

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

KR
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ARTICLES OF INCORPORATION

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

ARTICLE I : NAME

The name of the corporation shall be: **Carpet Installation Work Room, Inc.**

ARTICLE II : PRINICPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

11825 71st Circle N
Largo, FL 33773

ARTICLE III : SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 Shares

ARTICLE IV : INITIAL REGISTERED AGENT AND STREET ADDRESS

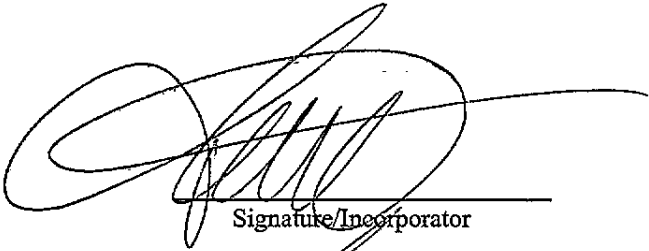
The name and Florida street address of the initial registered agent are:

Tomas Cruz, Jr.
11825 71st Circle N.
Largo, FL 33773

ARTICLE V : INCORPORATOR(S)

The name and address of the incorporator(s) to these Articles of Incorporation Are:

Tomas Cruz, Jr
11825 71st Circle N.
Largo, FL 33773


Signature/Incorporator


Date

Having been named as registered agent and to accept service of process for the above 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 Of Registered Agent


Date

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