TRANSMITTAL LETTER ON 100 September 19 1 September

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

SUBJECT:	Stoneage Marble and Granite, Inc. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)						
			60000437! -06/07/01- *****87.5	5 43 6 -01057-) ****	3 -02 *87	-9 3 .50	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:							
□ \$70.00 Filing Fee	\$\square\$ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	JAT	D S TAI		
FROM:	Amy Co Name (Pr 9701 Westview	rinted or typed)		OF STAI	1 JUN - 7 PM 12: 12	FILED	
Coral Springs, Fl 33676 City, State & Zip (954) 757-8186 Daytime Telephone number							

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

Blistor

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 62	FILED 1, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be:	OI JUN -7 PM 12: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Stoneage Martte and Gran	nite, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
9701 Westriew Drive #1436	Coral Springs, F1 33076
ARTICLE III PURPOSE The purpose for which the corporation is organized	
To fabricate and install mo	erble and granite countertops
ARTICLE IV SHARES The number of shares of stock is:	· · · · · · · · · · · · · · · · · · ·
ARTICLE V INITIAL OFFICERS DIRECTOR The name(s) and address(es):	TORS (optional)
Officers: Amy Colin 9701 Westvew Dr. #1436 Coral Springs iF1 33065	Carlos Pagan 19701 Westview Dr. 141436 Coral Springs, Fl 33076
ARTICLE VI REGISTERED AGENT The name and Florida street address of the	
The name and Florida street address of the register Amy Colin 9701 Westview Dr. #1436 Coral Springs. Fl 33076	ed agent is:
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: Amy Colin 9701 Westview Dr. # 1436 Coral Springs, F1 33076 ***********************************	*************
Having been named as registered agent to accept service of procertificate, I am familiar with and accept the appointment as re	icess for the above stated comparation at the state of
Any Coli	6-3-01
Signature/Registered Agent	Date

Date