101000004426

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

	1 DC CIC TILE & MARBLE, INC. cosed corporate name - must include suffix)	00044709011 -07/12/0101027014 - *****78.75 *****78.79
Enclosed is an original	and one (1) copy of the articles of incorporati	on and a check for:
	X78.75 Filing Fee & Certificate	FILED 01 JUL 12 P SEGRETARY C TALLAHASSEE
FROM	1: BONAFIDE CONSULTING, INC. Name (printed or typed)	PM 3: 22 Y OF STATE EE, FLORIDA
Deorgeanne Frist Bonafide Consulting.	788 SUNSET DR Address	
A-hele 10 + 0 activated	MELBOURNE, FL. 32935 City, State & Zip	 .
	(321) 253-8297 Daytime Telephone Number	<u> </u>

PS/13/04

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: ARTISTIC TILE & MARBLE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 272 ELDRON BLVD PALM BAY, FL. 32907

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
7500 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: KENNETH W OBERSON 272 ELDRON BLVD PALM BAY, FL. 32907

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator of these Articles of Incorporation are: KENNETH W OBERSON

272 ELDRON BLVD PALM BAY, FL. 32907

Signature/Incorporator

7/9/01 / Mate

(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.

1 Note W Olowson Signature/Registered Agent

Date