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CORPORATION(S) NAME

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CR2E031 (R8-85)

ARTICLES OF INCORPORATION

OF

FOUR TEEN FLOORING The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

FOURTEEN FLOORING CORP. The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

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

1833 NW 208 TELR. Penbeoke Pines - FL - 33029. ARTICLE III CAPITAL STOCK

tion.

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

100 @ \$ 1.00

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

WELLINGTON SOURA MOURA. 1833 NW ZO8 TERR. PEMBERG PING - FL - 33029.

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

We/Ington S. Moven. 1833 NW ZOSTERR Pembede Vines - Fl -33029.

LUCIAMA AMARAL PIRES 1833 NUN 208 FREK PROMBROKE TIMES-FL-33029.

The undersigned has(have) executed these Articles of Incorporation this

22	day of	
	< flusion) Mena -	Persisent,
	Signature/Title	
	Suciana Q. Veres - Signature/Title	Wice-Passident.
•	Signature/Title	And The Control of th

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Four	R TEEN	Floo	Ring C	coel.		e in the second
			1 Address Special	- 6:	<u></u>	, i
2. The name and address of the registere	ed agent	and office	is:			
<u>WELLINGTON SOUTH MOUN</u> (NAME)	en .	·	· -			
<u> /833 NW 208 FERR.</u> (P.O. BOX <u>NOT</u> AC	CEPTAB	LE)	 	* Arangi s	ar de es	
PembrokE Pines - FL.		29.		· · · -		en ve
(CITY/STATE	E/ZIP)					
S	ITLE		orate office	Johnson		* ** *** **** ****
. D	ATE	8/2	2/01			≟**
HAVING BEEN NAMED AS REGISTERE PROCESS FOR THE ABOVE STATED COITHIS CERTIFICATE, I HEREBY ACCEPT TAND AGREE TO ACT IN THIS CAPACITY. PROVISIONS OF ALL STATUTES RELATIFORMANCE OF MY DUTIES, AND I AM FOOM OF MY POSITION AS REGISTERED SI	RPORATI THE APPO I FURTI NG TO T FAMILIAF	ON AT TH DINTMEN HER AGRI HE PROF R WITH A	HE PLACE IT AS REG EE TO CO PER AND (DESIGNAT ISTERED A MPLY WITH	ED IN GENT H THE	

REGISTERED AGENT FILING FEE: \$35.00