2	(Requestor's Name)  (Requestor's Name)  (D5 LITTLE DEAL ROAD  (Address)  ALLAHASSEE, FLORIDA 323  (City, State, Zip)	08 385-6735 OFFICE USE ONLY (Phone #)	
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4	(Corporation ) Walk in Pic	k up time Certified Copy \$\frac{1}{2} \frac{1}{2} \frac{1}{2	
	ATTIVITY DICC	AMENDMENTS S	
7	NEW FILINGS	AMENDMENTS & &	
1	Profit NonProfit	Resignation of R.A., Officer/Director	
		Change of Registered Agent	
<u>.</u>	Limited Liability  Domestication	Dissolution/Withdrawal	
		Merger Merger	
	Other	(viei gei	
<del></del>	OTHER FILINGS	REGISTRATION/	
	Annual Report	QUALIFICATION 500046145855	>
	Fictitious Name	Foreign ******70.00	
	Name Reservation	Limited Partnership	
	1	Reinstatement	
		Trademark Examiner's Initials	
	CR2E031(10/92)	Other	

## ARTICLES OF INCORPORATION

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# DECORATING OPTIONS, INC.

### ARTICLE I NAME

The name of the corporation shall be:

**DECORATING OPTIONS, INC.** 

# ARTICLE II PRINCIPAL OFFICE

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

8348 NW 44<sup>TH</sup> Street Coral Springs, FL 33065

# ARTICLE III DURATION

This corporation shall have perpetual existence.

### ARTICLE IV PURPOSE

This corporation is organized for the purpose of any lawful business in the state of Florida



#### ARTICLE V CAPITAL STOCK

This corporation is authorized to issue One Thousand shares of One Dollar (\$1.00), par value common stock.

### ARTICLE VI PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

# ARTICLE VII INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is, 8348 NW 44<sup>th</sup> Street, Coral Springs, FL 33065, and the name of the initial registered agent of this corporation at that address is Susan Johns.

#### **ARTICLE VIII**

#### INCORPORATOR

The name and address of the Incorporator signing these Articles is:

Susan Johns 8348 NW 44<sup>TH</sup> Street Coral Springs, FL 33065

#### **ARTICI FIX**

### INDEMNIFICATION

The corporation shall indemnify any officer, director, or any former officer or director, to the full extent permitted by law.

# ARTICLE X AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporation has executed these Articles of Incorporation this 13 day of Suptember 2001.

Susan Johns Incorporator STATE OF FLORIDA ) ss. county of Broward.

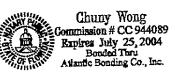
BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared **Susan Johns** who produced D/L 1520-793-55-689-0 as identification and to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 13th day of <u>September</u> 2001.

NOTARY PUBLIC, State of Florida

My Commission Expires:

(SEAL)



# 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

### DECORATING OPTIONS, INC.

The name and address of the registered agent and office is:

Susan Johns 8348 NW 44<sup>TH</sup> Street Coral Springs, FL 33065

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:	Sura	n	1	Do	liza	20	
	Susan Johns	!	1	1	ECRET	1 SEP	tores.
DATE:		91	13	<u> 0</u>	SSE	27	
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