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TRANSMITTAL LETTER

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

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-09/26/01--01060--006
*****87.50 *****87.50

SUBJECT: STAINS AND GLAZES INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: FRANK T COLLINS JR
Name (Printed or typed)

4024 DIMSDALE ROAD
Address

JACKSONVILLE FL 32257
City, State & Zip

(904) 268-6233
Daytime Telephone number

01 SEP 26 PM 1:28
FILED
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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

FILED

01 SEP 26 PM 1:28

9-27-01
100

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

STAINS AND GLAZES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4024 DIMSDALE ROAD
JACKSONVILLE FL 32257

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail + wholesale
Sales of ceramics

ARTICLE IV SHARES

The number of shares of stock is:

100 shares @ \$1.00 par value share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

FRANK T COLLINS JR
4024 DIMSDALE ROAD
JACKSONVILLE FL 32257
(PRESIDENT)

PENNY COLLINS
4024 DIMSDALE ROAD
JACKSONVILLE FL 32257
(TREASURER)

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

PENNY COLLINS
4024 DIMSDALE ROAD
JACKSONVILLE FL 32257

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FRANK T COLLINS JR
4024 DIMSDALE ROAD
JACKSONVILLE FL 32257

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Signature/Incorporator

Date

FILED
01 SEP 26 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA