

PO2000037746

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

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-04/01/02--01070--016
*****70.00 *****70.00

SUBJECT: wampler Flooring, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: Jesse Wampler

Name (Printed or typed)

4720 Barnes Road

Address

Jacksonville, fl 32207

City, State & Zip

904-636-9687

Daytime Telephone number

FILED
02 APR - 1 AM 10:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

D. WHITE APR - 8 2002

ARTICLES OF INCORPORATION

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

FILED

02 APR -1 AM 10:11

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

WAMPLER Flooring, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4720 Barnes Road, Jackosnville, fl 32207

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Floor Coverings Business

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Jesse Wampler, 4720 Barnes Road, Jacksonville, fl 32207

President

ARTICLE VI REGISTERED AGENT

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

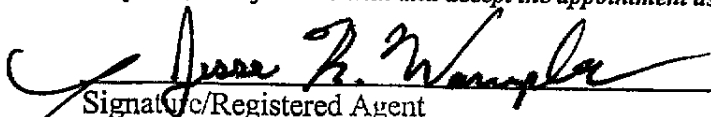
Jesse Wampler, 4720 Barens Road, Jacksonville, fl 32207

ARTICLE VII INCORPORATOR

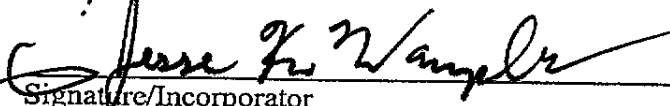
The name and address of the Incorporator is:

Jesse Wampler 4720 Barnes Road, Jacksonville, fl 32207

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