

PO2000046942

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

SUBJECT: Michael Tate, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200005347332--6
-04/25/02--01034--002
*****70.00 *****70.00

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: Michael Tate
Name (Printed or typed)

5678 Lisa Lynn Road
Address

Keystone Heights FL 32656
City, State & Zip

(904) (352) 4738417
Daytime Telephone number

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

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: *Michael Tate, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
*5678 Lisa Lynn Road
Keystone Heights FL 32656*

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):
*Michael Tate - President - 5678 Lisa Lynn Road
Keystone Heights FL 32656*

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
*Michael Tate - 5678 Lisa Lynn Road
Keystone Heights FL 32656*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
*Michael Tate - 5678 Lisa Lynn Road
Keystone Heights FL 32656*

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

Michael Tate

Signature/Registered Agent

4-18-02

Date

Michael Tate

Signature/Incorporator

4-18-02

Date