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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: The Linen Show 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: The Linen Show Inc.  
Name (Printed or typed)

561 NW 183rd Street  
Address

Miami, Fl. 33169  
City, State & Zip

305-654-9303  
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:

The Linen Show Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

561 NW 183rd Street, Miami. Fl. 33169

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Retail Sales

### **ARTICLE IV SHARES**

The number of shares of stock is:

One thousand (1,000)

### **ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

Shirley P Moore - President  
Serdar Sevinc -Vice President  
Fargson Ray -Treasurer

### **ARTICLE VI REGISTERED AGENT**

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

Fargson Ray  
561 NW 183rd Street, Miami. Fl.33169


### **ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Shirley P Moore  
5900 N Plumbay Parkway  
Tamarac, Fl. 33321

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Incorporator

5/19/03  
\_\_\_\_\_  
Date

5/20/03  
\_\_\_\_\_  
Date

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