## P03000075736

| ,                                       |                          |  |  |  |
|---|--------------------------|--|--|--|
| 4                                       | (Requestor's Name)       |  |  |  |
|   | (Address)                |  |  |  |
| *****                                   | (Address)                |  |  |  |
| *************************************** | (City/State/Zip/Phone #) |  |  |  |
| PICK-UI                                 | P WAIT MAIL              |  |  |  |
| (Business Entity Name)                  |                          |  |  |  |
| (Document Number)                       |                          |  |  |  |
| Certified Copies                        | Certificates of Status   |  |  |  |
| Special Instructions                    | s to Filing Officer:     |  |  |  |
|   |                          |  |  |  |
|   |                          |  |  |  |
|   |                          |  |  |  |
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|   |                          |  |  |  |

Office Use Only



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## TRANSMITTAL LETTER

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

| SUBJECT: FL  | ORIDA TILE OF CENTRA<br>(PROPOSED CORPORA) | AL FLORIDA, INC.<br>TENAME - MUSTINCLI            | IDE SUPPLY)             |  |  |
|--|--|---|-------------------------|--|--|
| Enclosed are an orig   | ginal and one (1) copy of the arti         | cles of incorporation and                         | l a check for:          |  |  |
| S70.00<br>Filing Fee   |  | S78.75 Filing Fee & Certified Copy  ADDITIONAL CO | & Certificate of Status |  |  |
| FROM:  |  |   | <del></del>             |  |  |
| THE TAX MASTER OF CENTRAL FLORIDA INC. 8127 VALENCIA COLLEGE LN. ORLANDO, FL 32825 |  |   |                         |  |  |
|  |  | 041<br>elephone number                            | <u> </u>                |  |  |

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

| In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)  |             |                     |
|---|-------------|---------------------|
| ARTICLE I NAME  |             |                     |
| The name of the corporation shall be:   |             | ·                   |
| FLORIDA TILE OF CENTRAL FLORIDA, INC.   |             |                     |
| ARTICLE II PRINCIPAL OFFICE   |             |                     |
| The principal place of business/mailing address is:   |             |                     |
| 7309 KAHA ST.   |             |                     |
| ORLANDO, FL 32822   |             | E 8                 |
| ARTICLE III PURPOSE   |             | O3 JUL -3 PH 3: 30  |
| The purpose for which the corporation is organized is:  | -           | 7                   |
| SALES AND INSTALLATION OF TILES   |             |                     |
|   |             | 7. 2                |
| ARTICLE IV SHARES   |             | <u>ښ</u> ښ          |
| The number of shares of stock is:   |             | <b>基础 公</b>         |
| 1,000 shares at \$1.00 per share  |             | 7. <b>4.</b> —      |
|   |             |                     |
| ARTICLE V INITIAL OFFICERS/DIRECTOR (OPTIO  | NAL)        | <u> </u>            |
| The name (s), address (s) and title (s):  |             |                     |
| RAUL LASTRA (PRESIDENT)   |             |                     |
| 7309 KAHA ST.<br>ORLANDO, FL 32822  |             |                     |
|   |             |                     |
| ARTICLE VI REGISTERED AGENT   |             | 2 <del>10</del> 000 |
| The name and Florida street address of the registered agent is:   |             | · /8 =              |
| RAUL LASTRA (REGISTERED AGENT)  |             |                     |
| 7309 KAHA ST.   |             |                     |
| ORLANDO, FL 32822   |             |                     |
| ARTICLE VII INCORPORATOR  |             |                     |
| The name and address of the Incorporator is:  | •           | •                   |
| RAUL LASTRA (INCORPORATOR)  |             |                     |
| 7309 KAHA ST.   |             |                     |
| ORLANDO, FL 32822   |             |                     |
| **************************************  | *****       | *****               |
| Having been named as registered agent to accept service of process for the abo  | ve stated c | orporation at the   |
| place designated in this certificate, I am familiar with and accept the appointment   | ent as regi | stered agent and    |
| agree to aet to this capacity.  |             |                     |
| 'Vort   |             | 6-30:03             |
| Signature/Registered Agent  | Date        |                     |
| ملق را  |             | 6-80-03             |
| Signature/Incorporator  | Date        |                     |
| organization in the property of the control of the | Dutt        |                     |

ARTICLES OF INCORPORATION