

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP      ☐ WAIT      ☐ MAIL

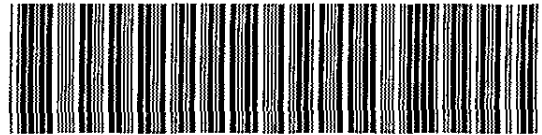
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA  
U.S. DISTRICT COURT

## TRANSMITTAL LETTER

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

SUBJECT: ELEGANT TOUCHES KITCHEN and BATH PRODUCTS, 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:

TROY A. SMITH

Name (Printed or typed)

323 CENTER AVE

Address

PORT CHARLOTTE FL 33952

City, State & Zip

941-625-7743

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:

ELEGANT TOUCHES KITCHEN and BATH PRODUCTS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

323 CENTER AVE  
PORT CHARLOTTE FL 33952

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

BUSINESS, WHICH SHALL BE FOR LAWFUL PURPOSE IN STATE OF FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 SHARES

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

The name(s) and address (es):

**ARTICLE VI REGISTERED AGENT**

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

TROY A SMITH  
323 CENTER AVE  
PORT CHARLOTTE FL 33952

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

TROY A SMITH  
323 CENTER AVE  
PORT CHARLOTTE FL 33952

\*\*\*\*\*  
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.

Troy Smith  
Signature/Registered Agent

9-4-03  
Date

Troy Smith  
Signature/Incorporator

9-4-03  
Date

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03 SEP 10 PM 11:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA