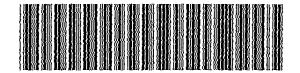
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SECRETARY OF STATE

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

	Re:	Coastal Tile & Stone Gallery , Inc.
Gentlemen:		
Enclosed please fir check in the amour		nal and one copy of the Articles of Incorporation, together with my
This represents the above named corpo		he Filing Fees and Fee for Registered Agent Designation for the
		Very truly yours.
		Margael Fool (Individual's Name)  Coastal Tile & Stone Gallery, Inc.
		(Name of Corporation)
		MAILING ADDRESS OF CORPORATION  182 S. Yonge Street  Ormond Beach, FL 32174
		PHONE  ( 386 ) 239-0903  Area Code Number Ext.

#### ARTICLES OF INCORPORATION of

Coa	astal Tile & Stone Gallery, Inc. (name of corporation)	<u> </u>
	(name or corporation)	<u>-</u>
The undersigned acting as the incorporadopt(s) the following articles of incorporadopt(s)	-	ida Business Corporation Act,
Af The name of the corporation is:	RTICLE I – CORPORATE NAME	03 SEP
Coa	stal Tile & Stone Gallery, Inc.	二
This corporation shall exist perpetually	ARTICLE II - DURATION	da law.
The corporation is organized for the pulaws of the United States and the State of		r business permitted under the
The corporation is authorized to issue	LE V – INITIAL PRINCIPAL OFFIC	CE
STREET ADDRESS		v 2
182 S Yonge Street	<del></del>	
CITY Ormond Beach	FLORIDA	ZIP 32174
Mailing address, if different	en e	and the second s
STREET ADDRESS Same as above	ve	र इ
		The second secon
CITY	FLORIDA	ZIÞ
ARTICLE VI – The street address of the initial register	INITIAL REGISTERED OFFICE AN red office and the name of the initial	registered agent at the office is:
NAME Margaret Todd		

FLORIDA

ZIP 32174

Margaret Todd

Ormond Beach

182 S. Yonge Street

**ADDRESS** 

CITY

#### ARTICLE VII - INITIAL BOARD OF DIRECTORS

f the initial d	•	
NAME	Margaret Todd	
ADDRESS	182 S Yonge Street	
CITY	Ormond Beach	STATE FL ZIP 32174
NAME		
ADDRESS		
CITY		STATE
NAME		
ADDRESS		
CITY		STATE
The names a	and address of the incorp	porators signing these Articles of Incorporation are as follows:
The names	and address of the incorp	porators signing these Articles of Incorporation are as follows:
NAME	Margaret Todd	
NAME ADDRESS	Margaret Todd  182 S Yonge Street	STATE FI. 71P 37174
NAME ADDRESS CITY	Margaret Todd  182 S Yonge Street	STATE FI. 71P 37174
NAME ADDRESS CITY NAME	Margaret Todd  182 S Yonge Street	STATE FI. 71P 37174
NAME ADDRESS CITY NAME ADDRESS	Margaret Todd  182 S Yonge Street	STATE FL ZIP 32174
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NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY CITY	Margaret Todd  182 S Yonge Street  Ormond Beach	STATE ZIP 32174  STATE ZIP  STATE ZIP
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The undersi	Margaret Todd  182 S Yonge Street  Ormond Beach  gned incorporator(s) have	STATE ZIP  STATE ZIP  STATE ZIP  ve executed these Articles of Incorporation this 29th
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	Margaret Todd  182 S Yonge Street  Ormond Beach  gned incorporator(s) have	STATE ZIP  STATE ZIP  STATE ZIP  ve executed these Articles of Incorporation this 29th  203.
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The undersi	Margaret Todd  182 S Yonge Street  Ormond Beach  gned incorporator(s) have	STATE ZIP  STATE ZIP  STATE ZIP  ve executed these Articles of Incorporation this 29th

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE



(Date)

### Coastal Tile & Stone Gallery, Inc.

Pursuant of I	Florida Statutes Section	s 48.091 and 6	07.0501, the fo	ollowing is s	ubmitted:	
The above co	orporation, organized u	nder the laws o	f the State of F	lorida with	its registere	ed office
as indicated	in the Articles of Incorp	poration				
at	182 S. Yonge Street	<del> </del>		<u> </u>	<u> </u>	· =.
	Ormond Beach, FL 3	2174				••
has named _	Margaret Todd	<i>i</i>			<u></u>	रह <sup>‡</sup> ं
state.						
corporation a registered ag all statutes re	named as registered ag at the place designated in ent and agree to act in t elating to the proper and the obligations of my pos	n this certificat his capacity. I I complete perf	e, I hereby acc further agree t formance of my	ept the appo	ointment as ith the prov	visions of
M	SD EDN		A	wayat 20, 200	0.2	

(Signature)