

PO3000111697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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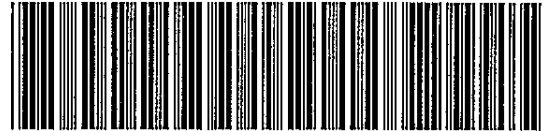
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 OCT -6 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: DAVID T. SMITH CUSTOM TILE SERVICES, 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:

DAVID T. SMITH
Name (Printed or typed)

116 SEA GRAPE RD.
Address

MELB. Bch. FL. 32951
City, State & Zip

321-480-0367 , 321 725-5247
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)

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ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DAVID T. SMITH CUSTOM TILE SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

116 SEA GRAPE RD. MELB. Bch. FL. 32951

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TILE & MARBLE INSTALLATION

ARTICLE IV SHARES

The number of shares of stock is: 1000 SHRS

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

PRESIDENT - DAVID T. SMITH,
116 SEA GRAPE RD.,
MELB Bch. FL. 32951

ARTICLE VI REGISTERED AGENT

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


DAVID T. SMITH
116 SEA GRAPE RD.,
MELB. Bch FL 32951

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID T. SMITH
116 SEA GRAPE RD.,
MELB Bch FL 32951

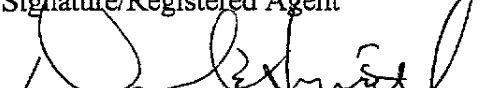
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10-2-03

Date



Signature/Incorporator

10-2-03

Date