

P030000118991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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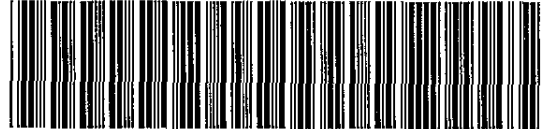
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/24/03--01004--009 **78.75

FILED

03 OCT 24 PM 9:18

STATE
TALLAHASSEE, FLORIDA

RECEIVED

03 OCT 24 AM 9:05

STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Scott's Hardwood Flooring, 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:

Scott H. CASTLETON
Name (Printed or typed)

2049 FOSHAGE DRIVE
Address

TALLAHASSEE, FL 32317
City, State & Zip

850-656-8973
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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Scott's Hardwood Flooring, Inc.

03 OCT 24 PM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2049 FOSHALES DRIVE TALLAHASSEE, FL 32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSTALLATION OF HARDWOOD FLOORING.

ARTICLE IV SHARES

The number of shares of stock is:

1000 NO PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

SCOTT HUDSON CASTLETON - PRESIDENT

2049 FOSHALES DRIVE

TALLAHASSEE, FL 32317

ARTICLE VI REGISTERED AGENT

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

SCOTT H. CASTLETON

2049 FOSHALES DR.

TALLAHASSEE, FL 32317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SCOTT H. CASTLETON

2049 FOSHALES DR

TALLAHASSEE, FL 32317

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

10/23/03

Date



Signature/Incorporator

10/23/03

Date