P03000123865

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400023506804

10/14/03--01026--006 **78.75

GOOT IL PH 2: 22
SECRE LARY OF STATE
AND ASSEEL FLORIDA

3/5/20

TRANSMITTAL LETTER

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

	(FROI OSED CORI OR	TE MANE - MOST INCL	<u>VVESCITIA</u> :
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Joanna S. Will	nn\Son (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	5501 Wendy L	Q.Y. P. Address	
· · · · · · · ·	Naples, FL 34	, State & Zip	F1
	239-596-352 Daytime	O Telephone number	

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



RECEIVED 03 OCT 31 PM 2: 35

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 17, 2003

JOANNA S. NICHOLSON 5501 WENDY LN NAPLES, FL 34112

SUBJECT: ARTISTIC TRIM, INC. Ref. Number: W03000030229

We have received your document for ARTISTIC TRIM, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2004 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith Document Specialist New Filings Section

Letter Number: 003A00056831

* as per our telephone conversation, artistic Trim, LLC has updated their UBR Lmade payment. Please process our Inc. request 10 N 1

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
ARTICLE I NAME		
The name of the corporation shall be:		
Artistic Trim, Inc.		
ARTICLE II PRINCIPAL OFFICE	03 OCT 14 PM 2: SECRETARY OF ST TALLAHASSEE, FLO	
The principal place of business/mailing address is:	ESE O	
5501 Wendy Lane	25 T	- Character
Naples, FL 34112	SE SE	
ARTICLE III PURPOSE	지 글	M
The purpose for which the corporation is organized is:	2: 22 STATE FLORID	
To install cabinetry related trimwork.	22 RIDA	
ARTICLE IV SHARES The number of shares of stock is: 10,000 @ a Jalue 0? 50.0	ool/share	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): President: Joanna S. Nicholson, 5501 Wendy Ln	Japles, FL 34	112
vice President: Ferneth G. Nicholson, 5501 Wendy	Lane, Naples,	FL 3411a
CEO: Kenneth McCafferty, 23600 Walden Cente		
•	()	, _ ,
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:		341
	•	•
cenneth G. Nicholson		
5501 Wendy Lane Naples, FL 34112		
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:	•	
Joanna S. Nicholson		
5501 Wonda Lang		
5501 Wendy Lane Naples, FL 34112		
<i>፟</i> ፞ቝፙቝ፟፟፟፟፟፟ቝ፟ቝ፟ፙቝ፟ቝ፟፟ቝ፟ቝ፟ቝቝቝቝቝቝቝቝቝቝቝቝቝቝ	********	****
Having been named as registered agent to accept service of process for the above stated corpor	ration at the place designa this canacity	***** ted in this
<i>፞</i> ፞፞፞፞፞፞፞፞ቝ፟፟ቝ፟ቝ፟ቝ፟ቝ፟ቝ፟ቝ፟ቝ፟ቝቝቝቝቝቝቝቝቝቝቝቝ	ration at the place designa this capacity	***** ted in this
Having been named as registered agent to accept service of process for the above stated corpor certificate, I am familiar with and accept the appointment as registered agent and agree to act in	ration at the place designa this capacity Date	****** ted in this
Having been named as registered agent to accept service of process for the above stated corpor	this capacity	***** ted in this