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(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office\Use Only
	11/21/



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TRANSMITTAL LETTER

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

SUBJECT: MAT KEARSE, Inc.				
	(PROPOSED CORPORATE)		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	
FROM: MATTHEW H. KEARSE Name (Printed or typed) 9625 NEISON ROAD Address				
•	352-567	State & Zip - Z8Z9	33525	

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)

NAME

The name of the corporation shall be: Matt Kearse, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9625 Nelson Road

Dade City, FL 33525

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Installation of floor coverings for both residential and commercial customers.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President - Matthew H. Kearse - 9625 Nelson Road, Dade City, FL 33525

Vice President – Kyle J.Thompson – 36813 Walnut Avenue, Zephyrhills, FL 33541

Secretary - Matthew H. Kearse - 9625 Nelson Road, Dade City, FL 33525

Treasurer - Matthew H. Kearse - 9625 Nelson Road, Dade City, FL 33525

ARTICLE VI REGISTERED AGENT

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

Matthew H. Kearse

9625 Nelson Road

Dade City, FL 33525

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Matthew H. Kearse

9625 Nelson Road

Dade City, FL 33525

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 of registered agent and agree to act in this capacity.

STATE OF FLORIDA COUNTY OF POLK

authorized in the state and county named above to take acknowledgments, personally appeared Nothern KV. Nearle, who provided Nearle as identification, or who is personally known to me to be the person described as incorporator in and who executed the foregoing Articles of Incorporation, and Nathon KV. Large, acknowledged before me that he subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the state and county named above this day of / () 2003.

Kathleen Nichols Notary Public

My Commission expires: (affix notarial seal)

