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To:

Division of Corporations

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From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone Fax Number : (305)634-3694

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FLORIDA PROFIT CORPORATION OR P.A.

schaefer tile, inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
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ARTICLES OF INCORPORATION

Schaefer Tile, Inc.

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be:

Schaefer Tile, Inc.

ARTICLE 11 January 1, 2004 following

This corporation shall commence existence upon the date of filling with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation is:

829 Sunridge Point Dr. Seffner, FL 33584

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE Y

The aggregate number of shares which this corporation shall have ' authority to issue are 100 shares having an individual par value of \$1.00

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Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

The name and street address of the initial Registered Agent of this corporation shall be:

Jesse Schaefer 829 Sunridge Point Dr. Seffner, FL 33584

ARTICLE VII

The name and address of the initial board of director(s) shall be:

Jesse Schaefer 829 Sunridge Point Dr. Seffner, FL 33584

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

Sharon D. Turner P.O. Box 1042 Riverview, FL 33568

The undersigned has executed these Articles of Incorporation this <u>20</u>th day of <u>November</u>, 20 <u>0</u> 3.

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT

03 NOV 21 AM 9: 15
SECRETARY OF STATE
TALLAHASSEF. FI ORID.

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