

P03000152109

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

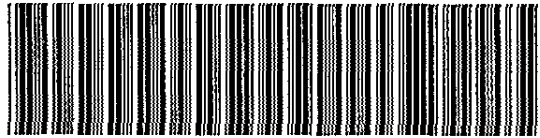
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 DEC 15 AM 6:59

12-17-03  
11/17/03

## TRANSMITTAL LETTER

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

**SUBJECT:** WILLIAMS ENTERPRISES, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:** TRACY ALLEN WILLIAMS

Name (Printed or typed)

5872 WILLOW LANE

Address

CRESTVIEW, FLORIDA 32539

City, State & Zip

850-689-4792

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

December 1, 2003

TRACY ALLEN WILLIAMS  
5872 WILLOW LANE  
CRESTVIEW, FL 32539

SUBJECT: WILLIAMS ENTERPRISES, INC.  
Ref. Number: W03000035670

RECEIVED  
03 DEC 15 PM 3:23  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

We have received your document for WILLIAMS ENTERPRISES, 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

The effective date is not acceptable since it is not within five working days of the date of receipt.

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) 245-6995.

Wanda Cunningham  
Document Specialist  
New Filings Section

Letter Number: 003A00064320

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 DEC 15 AM 6:59

## ARTICLE I NAME

The name of the corporation shall be:

WILLIAMS VENTURES, INC.

EFFECTIVE DATE: DECEMBER 15, 2003

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5874 WILLOW LANE  
CRESTVIEW, FLORIDA 32539

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FLOOR COVERING CONTRACTOR / MISC. SERVICES

## ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES @ \$1.00 PAR VALUE, COMMON STOCK

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

TRACY ALLEN WILLIAMS PRESIDENT / TREASURER  
5872 WILLOW LANE  
CRESTVIEW, FL 32539

## ARTICLE VI REGISTERED AGENT

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

TRACY ALLEN WILLIAMS  
5872 WILLOW LANE  
CRESTVIEW, FL 32539

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

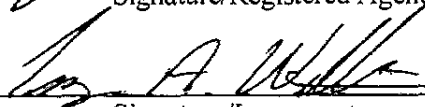
TRACY ALLEN WILLIAMS  
5872 WILLOW LANE  
CRESTVIEW, FL 32539

\*\*\*\*\*  
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

12-08-03

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12-08-03

\_\_\_\_\_  
Date