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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busilless Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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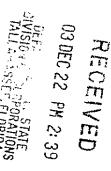




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SEURETARY OF STATE ALLAHASSEE, FLORIDA



TRANSMITTAL LETTER

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

SUBJECT: DAVID B. Owens Wall Covering Inc.
(Proposed corporate asses - must include outling)

Enclosed is an original and one(1) copy of the articles of incorporation and a chack for :

S70.00 Filing Fee

S78.75
Fling Fee & Certificate of

Status

2578.75

Filing Fee & Cartified Copy ☐ \$87.50

Filing Fee,

Certified Copy

ADDITIONAL COPY REQUIRED

PROM: Robat X Lyons
Name (Printed or typed)

2901 W. Busch Blud # 1000

TAM PA Florida 33618

Devime Telephone number

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

ARTICLES OF INCORPORATION

FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation. 03 DEC 22 PM 3: 05

ARTICLE 1 NAME

The name of the corporation shall be: David B. Owens Wall Covering, Inc. SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE 11 PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1507 Windermere Way Tampa, Fl. 33619

ARTICLE 111 SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 50 Shares of common stock @ \$ 10.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address: Robert Lyons 2901 W. BUSCH BLVD. SUITE # 1005 Tampa, FL. 33618

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of incorporation are: David B. Owens
1507 Windermere Way
Tampa, Fl. 33619

Signature/Incorporator

Duit

(An additional article must be added if an affective date is requested)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 status 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

Signature/Registered Agent

Date