

P04000000278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

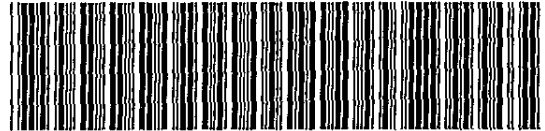
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Anthony Rivera GAYE
AUTHORIZATION BY PHONE TO
CORRECT Article II
DATE 1-2-04
DOC. EXAM 10/11

Office Use Only



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12/18/03--01048--017 **78.75

SECRETARY
TALLAHASSEE - FLORIDA

03 DEC 18 PM 2:08

FILED

TRANSMITTAL LETTER

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

SUBJECT: ANTHONY FLOOR COVERING, 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: ANTHONY RIVERA

Name (Printed or typed)

1539 GENIE ST

Address

ORLANDO FL. 32828

City, State & Zip

(407) 405-3353

Daytime Telephone number

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)

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03 DEC 18 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:
ANTHONY FLOOR COVERING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
1539 GENIE ST,
ORLANDO FL. 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation may engage in or transact any and all lawful activities of bussiness permitted under the laws of the United State, the State of Florida, or any other state, county, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is:
10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Anthony Rivera
1539 Genie St.
Orlando Fl. 32828

ARTICLE VI REGISTERED AGENT

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

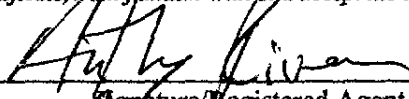
Anthony Rivera
1539 Genie St.
Orlando Fl. 32828

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anthony Rivera
1539 Genie St
Orlando Fl. 32828


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

Dec. 14/2003

Date



Signature/Incorporator

Dec. 14/2003

Date