

PO4000001890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

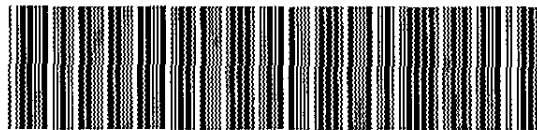
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

TS  
1/6/04

## TRANSMITTAL LETTER

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

SUBJECT: Greg Norman's Floor Covering Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Gregory A. Norman  
Name (Printed or typed)

117 Juniper Cir  
Address

Ocala FL 34479  
City, State & Zip

352-245-7130  
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)

## ARTICLE I NAME

The name of the corporation shall be:

*Greg Norman's Floor covering inc.*

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*117 Juniper cir  
Ocala FL 34479*

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*install floor covering*

## ARTICLE IV SHARES

The number of shares of stock is:

*5*

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

*P. Gregory A. Norman  
117 Juniper cir.  
Ocala FL 34479*

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TALLAHASSEE, FLORIDA

## ARTICLE VI REGISTERED AGENT

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

*Gregory A. Norman  
117 Juniper cir.*

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Gregory A. Norman  
117 Juniper cir.  
Ocala FL 34479*

\*\*\*\*\*  
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

*Gregory A. Norman*  
Signature/Registered Agent

*1-6-04*  
Date

*Gregory A. Norman*  
Signature/Incorporator

*1-6-04*  
Date