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FILED 03 DEC 22 PM 3: 35 Secretaris (Jalaka)

TRANSMITTAL LETTER

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

SUBJECT: Andr	e's Floor Covering, Inc.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	-
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM: A	ndre Lelievre	(Printed or typed)	wife is the second	eren eren eren eren eren eren eren eren
	Name	(Printed or typed)		
	80 Hudson Drive		<u> –</u> 4	
		Address	· <u>·</u> ·····	•
Freeport, Florida 32439 City, State & Zip				e de la companya de
	City	, State & Zip		
	850-897-3471			, an E
	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:

Andre's Floor Covering, Inc.

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SECRETARY OF STATE FALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 80 Hudson Drive Freeport, Florida 32439

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Installation of floor coverings and all other lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Andre Lelievre - Director

ARTICLE VI REGISTERED AGENT

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

Andre Lelievre 80 Hudson Drive Freeport, Florida 32439

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Andre Lelievre 80 Hudson Drive Freeport, Florida 32439

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

Signature/Incorporator

Mate

Date