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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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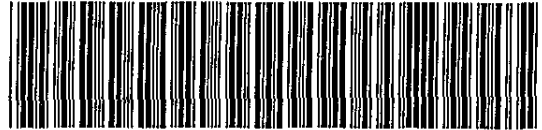
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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1-8-04

TRANSMITTAL LETTER

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

SUBJECT: MARCUS RODRIGUEZ FLOORING, 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:

MARCUS L. RODRIGUEZ
Name (Printed or typed)

P. O. BOX 624
Address

OCALA, FL 34478
City, State & Zip

352-875-5032
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 26 PM 12:37

ARTICLE I NAME

The name of the corporation shall be:

Marcus Rodriguez Flooring, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8851 SE 79 AVE. RD
Ocala, FL 34472

MAILING:

P.O. BOX 624
Ocala, FL 34478

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in complete flooring installation, sales and disposal. To engage in any lawful act or activity for which corporation may be organized under the General Law of F

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Marcus L. Rodriguez
President/Treasurer
P.O. BOX 624
Ocala, FL 34478

Tomas Rodriguez
Vice President/Secretary
P.O. BOX 624
Ocala, FL 34478

ARTICLE VI REGISTERED AGENT

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

Marcus L. Rodriguez
8851 SE 79 AVE. RD.
Ocala, FL 34472

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Marcus L. Rodriguez
8851 SE 79 AVE. RD.
Ocala, FL 34472

Telephone #
(352) 875-5032

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

Marcus L. Rodriguez
Signature/Registered Agent

12/24/03
Date

Marcus L. Rodriguez
Signature/Incorporator

12/24/03
Date