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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

W03-25422

TRANSMITTAL LETTER

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

SUBJECT: Vincent LaLicata Flooring 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: Vincent LaLicata Jr.
Name (Printed or typed)

2425 Caring way #208
Address

Port Charlotte, FL 33952
City, State & Zip

after 941-627-2783
Daytime Telephone number

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

RECEIVED
03 DEC 26 PM 1:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
04 JAN -8 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Vincent Lalicata Flooring Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2425 Caring WAY #208
P.C. FL. 33952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Install Floor Covering's.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS/DIRECTORS

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

Vincent Lalicata C.E.O.
2425 Caring Way #208
P.C. FL. 33952

ARTICLE VI REGISTERED AGENT

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

Vincent Lalicata
2425 Caring Way #208
P.C. FL. 33952

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Vincent Lalicata
2425 Caring WAY #208
P.C. FL 33952

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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 — Date: 1-6-04

Signature/Incorporator — Date: 1-6-04