

P04000021852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

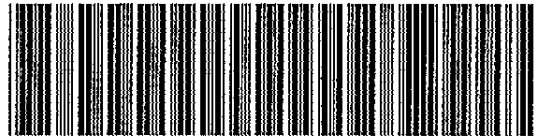
(Business Entity Name)

(Document Number)

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

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04 JAN 22 PM 1:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: MURESAN 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: OVIDIU MURESAN  
Name (Printed or typed)

8080 S. WOODS CIR., APT. 2  
Address

FORT MYERS, FL., 33919  
City, State & Zip

239-898-8018  
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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be: MURESAN INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 8080 S. WOODS CIR., APT. 2  
FORT MYERS, FL, 33919

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TILE AND MARBLE INSTALATION  
REMODELING

## 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):

OVIDIU MURESAN - DIRECTOR  
8080 S. WOODS CIR., APT. 2  
FORT MYERS, FL, 33919

## ARTICLE VI REGISTERED AGENT

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

OVIDIU MURESAN  
8080 S. WOODS CIR., APT. 2  
FORT MYERS, FL, 33919

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OVIDIU MURESAN  
8080 S. WOODS CIR., APT. 2  
FORT MYERS, FL, 33919

\*\*\*\*\*  
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

Ovidiu Muresan  
Signature/Registered Agent

01.16.2004  
Date

Ovidiu Muresan  
Signature/Incorporator

01.16.2004  
Date