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TRANSMITTAL LETTER

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

	(
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Ron Benfield	(Printed or typed)	
	58 Sioux	Circle	
	Havana, Fl	32333 State & Zip	
(850) 539-5171 Daytime Telephone number			

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

The name of the corporation shall be: Michael Walkins Tile Services Inc ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 70 Hines St. Crawfordville, 19 33327 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Con Struction	FILED 2004 FEB 10 P 4: 08 SECRETARY OF STATE TALLAHASSEE. FLORIDA
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Michael Watkins 70 Hines St Clawfold ville, FI 32 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Ron Benfield	9397- Resident
58 Sione Circle Howana, A 33333 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Ron Ben Field	•••
58 Sidux Circle Havana, # 32333	
Having been named as registered agent to accept service of process for the above stated corporation of certificate, I am familiar with and accept the appointment as registered agent and agree to act in this can Signature/Registered Agent	at the place designated in this
Signature/Incorporator	Date

*ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)