

PD4000064340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

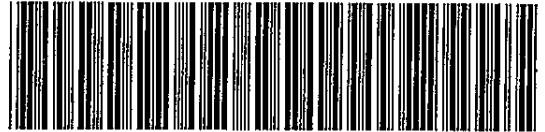
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SCOTT COUNTY, FLORIDA  
TALLAHASSEE, FLORIDA

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2/14/04

## TRANSMITTAL LETTER

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

SUBJECT: AUSTIN WINSTON LEWIS, 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: TAX PROFESSIONAL SERVICES, INC  
Name (Printed or typed)

9645 E. COLONIAL DR STE 109  
Address

ORLANDO, FLORIDA. 32817  
City, State & Zip

(407)207-8070  
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:

AUSTIN AND WINSTON TILE, INC

### **ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/mailling address is:

900 MAPLE FOREST DR  
ORLANDO, FLORIDA. 32825

### **ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

TILE INSTALLATION

### **ARTICLE IV    SHARES**

The number of shares of stock is:

10,000 AT PART VALUE \$1.00 EACH

### **ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

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

WINSTON LEWIS/ PRESIDENT  
900 MAPLE FOREST DR  
ORLND0, FLORIDA. 32825

### **ARTICLE VI    REGISTERED AGENT**

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

WINSTON LEWIS  
900 MAPLE FOREST DR  
ORLANDO, FLORIDA 32825

### **ARTICLE VII    INCORPORATOR**

The name and address of the Incorporator is:

WINSTON LEWIS  
900 MAPLE FOREST DR  
ORLANDO, FLORIDA 32825

\*\*\*\*\*

*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*

WJ Lewis  
Signature/Registered Agent

04/07/2004

Date

WJ Lewis  
Signature/Incorporator

04/07/2004

Date

**FILED**

04 APR 12 PM 3:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA