

P04 0000 76001

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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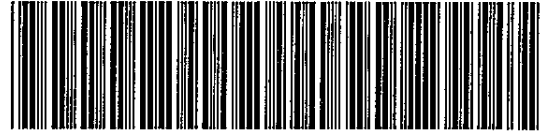
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 MAY -7 PM 4:46

## TRANSMITTAL LETTER

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

SUBJECT: TILES BY LYLIAN PACI 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: LYLIAN PACI + NELSON OZORIO DA SILVA  
Name (Printed or typed)

5135 BAGLESMEER DR.  
Address

ORLANDO, FL 32819  
City, State & Zip

(407) 248-8633  
Daytime Telephone number

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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:

TILES by LYLIAN PACI Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

5135 EAGLESMEER DR  
ORLANDO, FL 32819

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all Lawful business

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

LYLIAN PACI - PRESIDENT  
NELSON OZORIO DA SILVA - VICE PRESIDENT

5135 EAGLESMEER DR  
ORLANDO FL 32819

**ARTICLE VI REGISTERED AGENT**

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

LYLIAN PACI  
5135 EAGLESMEER DR  
ORLANDO, FL 32819

*Lylian Paci*  
LYLIAN PACI

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LYLIAN PACI  
5135 EAGLESMEER DR.  
ORLANDO, FL 32819

*Lylian Paci*  
LYLIAN PACI

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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

*Lylian Paci* LYLIAN PACI  
\_\_\_\_\_  
Signature/Registered Agent

5-4-04  
\_\_\_\_\_  
Date

*Lylian Paci* LYLIAN PACI  
\_\_\_\_\_  
Signature/Incorporator

5-4-04  
\_\_\_\_\_  
Date