# Po4000117075

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7

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## TRANSMITTAL LETTER

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

SUBJECT: CARL'	S CUT N' LAY INC _				
<del></del>	(PROPOSED CORPORATE	NAME-MUST INCLUDE SUFF	IX)		
Enclosed is an original an	d one (1) copy of the arti	cles of incorporation a	nd a check for:		
X \$70.00 Filing Fee	\$78.75 Filing Fee &	\$78.75 Filing Fee &	\$87.50 Filing Fee,		
rning ree	Certificate of Status	Certified Copy	Certified Copy &		
	Commonto di Statas	oominou oopy	Certificate of		
			Status		
		ADDITIONAL	COPY REQUIRED		
FROM:	Carl Appleglise		,		
	Name	(Printed or typed)	- <del></del>		
11244 Shady Glen Dr					
Address					
	Independite Floride 2	2257			
Jacksonville, Florida 32257 City, State & Zip					
	904 374-6208				
Daytime Telephone Number					

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

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

### ARTICLE I

CARL'S CUT N' LAY INC

#### ARTICLEII

PRINCIPAL OFFICE: The principal place of business and mailing address of this corporation shall be:

11244 Shady Glen Dr. JACKSONVILLE, FL 32257

#### ARTICLE III

PURPOSE: The purpose for which the corporation is organized is to conduct carpet installation within accordance of the business laws for the State of Florida.

#### ARTICLE IV

AUTHORIZED CAPITAL STOCK: The total number of shares of which the Corporation shall have the authority to issue is 1000 shares, and the par value of each share shall be:

\$1.00/share

## ARTICLE V INITIAL OFFICERS:

## PRESIDENT: CARL APPLEGLISE 11244 Shady Glen Dr. JACKSONVILLE, FL 32257

#### ARTICLE VI

INITIAL REGISTERED OFFICE/AGENT: The street address of the Corporation's initial registered office in the State of Florida is:

11244 Shady Glen Dr. JACKSONVILLE, FL 32257 and the name of its initial registered agent at such address is:

## Gary Place

#### ARTICLE VII

INCORPORATOR(S): The name and address of the incorporator(s) to theses Articles of Incorporation are:

CARL APPLEGLISE 11244 Shady Glen Dr. JACKSONVILLE, FL 32257

The undersigned has executed the this, the $941$ day of Augu	se Articles of Incorporation on st 2004
Coul apply liso Incorporator's Signature	Incorporator(s)'s Signature

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 of Registered Agent

Signature of Incorporator

Date

8/9/04

Date

TALL DE STATE