

PD4000137361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

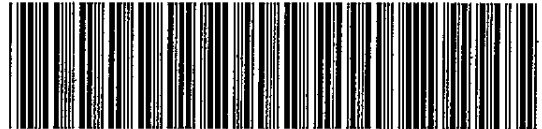
(Business Entity Name)

(Document Number)

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04 OCT -4 PM 2:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

10/1/04

TRANSMITTAL LETTER

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

SUBJECT: MIKE MASTERS FLOORING, 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: MELROSE ACCOUNTING & TAX SERVICE, INC.

Name (Printed or typed)

P.O. BOX 1430

Address

MELROSE, FLORIDA 32666

City, State & Zip

352-475-2100

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:

MIKE MASTERS FLOORING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8379 S.E. 11TH AVE.
STARK, FLORIDA 32091

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSTALLATION OF FLOORING OR ANY LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHAEL W. MASTERS, PRESIDENT
8379 S.E. 11TH AVE.
STARKE, FLORIDA 32091

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

MICHAEL W. MASTERS
8379 S.E. 11TH AVE.
STARKE, FLORIDA 32091

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL W. MASTERS
8379 S.E. 11TH AVE.
STARKE, FLORIDA 32091

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/Registered Agent

9/23/04

Date


Signature/Incorporator

9/23/04

Date