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TRANSMITTAL LETTER

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

Subject

Jozsef Sari Tile Inc.

Enclosed is an original and two (2) copies of the articles of incorporation and a check for

\$70.00 Filing Fee

⊠ \$78.75

Filing Fee

& Certified Copy

\$78.75

\$87.50

Filing Fee & Certified Copy Filing Fee,

Certified Copy & Certificate

(ADDITIONAL COPY REQUIRED)

FROM:

Nellie Akalp

Name

30141 Agoura Rd., Suite 205,

Address

Agoura Hills, California 91301

City, State & Zip

818-879-9079

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

'ARTICLES OF INCORPORATION OF Jozsef Sari Tile Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

ARTICLE I NAME	
The name of the Corporation shall be: Jozsef Sari T	ile Inc.
	tile Inc.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address	of this corporation shall be:
7400 731 70.1	
7482 Blutter Rd.	7: 41 STATE LORID
North Port, Florida 34286	DA DA
ARTICLE III SHARES	
	ized to have outstanding at any one time is: 1,500 at
\$0.01 par value per share.	3
•	
<u>ARTICLE IV INITIAL DIRECTOR</u>	
The name(s) and address(s) of the initial Director(s)	is/are:
Jozsef Sari	
7482 Blutter Rd.	
North Port, Florida 34286	
ARTICLE V INITIAL REGISTERS	ED AGENT AND STREET ADDRESS
The name and Florida street address of the initial re	
Jozsef Sari	
7482 Blutter Rd.	
North Port, Florida 34286	
ADTICLE WE INCORDED ATOR	
ARTICLE VI INCORPORATOR The name and address of the incorporator to these A	utialog of Incomposition is:
The name and address of the incorporator to these A	rticles of incorporation is:
Nellie Akalp	
30141 Agoura Rd., Suite 205	
Agoura Hills, California 91301	, ,
Modica (Manho	10/22/00
- / Clear Court	10/22/09
Nellie Akaip, Incorporator	Date
Having been named as registered agent and to accept ser place designated in this certificate, I hereby accept the ap	
capacity. I further agree to comply with the provisions of	
performance of my duties, and I am familiar with and account	cept the obligations of my position as registered agent.
	10/26/04
Infract Comi. De mintered A mont	70/20/01
Jozsef Sari, Registered Agent	Date