## P04000/62740

(Requestor's Name)				
(requestors realite)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer.				
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Office Use Only



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## TRANSMITTAL LETTER

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

SUBJECT: A	ROV'S POOTESIN	MAME - MUST INCLUD	COVERING ESUFFIXI	Inc.
Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and	a check for :	
\$70.00 Filing Fee	Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED	
	AARON WELL	FROM: ESLEY rinted or typed)		
	4436 Sherba	RNE 720 Address		
	TALLAHASSEE City,	FL 32303 State & Zip	·	
	<u> 850 - 609 -</u> Daytime Te	6258		

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) The name of the corporation shall be: Aaron'S Proffesional Floor Covering GS ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4436 Sherborne rd tallahassee FL 32303 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: ARTICLE IV The number of shares of stock is: 2 INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Aaron Welleshy CEO tallahassee .fl 4435 SherborNE rd REGISTERED AGENT The name and Florida street address of the registered agent is: Sherborne RD TAILAHASSEE FL 32303 Aaron Wellesley ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Sherborne rd fallahassee FL 32303 aaron Wellesley 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/Incorporator