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TRANSMITTAL LETTER

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

SUBJECT:	OND STOVENS PROPOSED CORPORA	TILLE TILC	UDE SUFFIX)
	(FROT OSEE COM ORD)	NICOT INCO	ODL SOLIM)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	TOOD E	STITIOUS (Printed or typed)	
	_1585 SIQ	Sh Pine Ct	<u></u>
	Ovange Pa	Crk F/3) State & Zip	073_
	904-2 Daytime T	78-7593 elephone number	· · · · · · · · · · · · · · · · · · ·

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 11, 2005

TODD E STEVENS 1585 SLASH PINE CT ORANGE PARK, FL 32073

SUBJECT: TODD STEVENS TILE, INC.

Ref. Number: W05000012885

We have received your document for TODD STEVENS TILE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 705A00016980

This has been Corrected.

05 MAR 23 PN 12: 21

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
The name of the corporation shall be: TODD STEVENS TILE, THIC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1585 Slash Punc Ct Orange Pank, F1 32073
ARTICLE III PURPOSE The purpose for which the corporation is organized is: TO be a Subcontractor for builders - laying t
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): TOCICI STURNS - DYCS ICIENT/OWNCV 1585 Slash Dune Ct Ovange Park, \$1 32073 ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: TOCK STUDIE 1586 3 IOSH PLNE C+ OVANGE POVE, FI 32073 ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is: TOCICL SEVENS 1585 SICUSH PURC CF OMINIE PARC IFL 32073

3-1-05
Signature/Registered Agent Date
3-1

Date

Signature/Incorporator