

P05000066837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

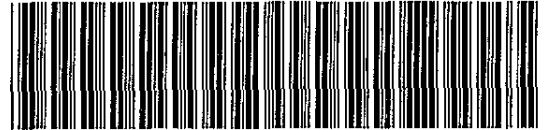
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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ATLW  
05 MAY -4 AM 8:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05-9

## TRANSMITTAL LETTER

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

**SUBJECT:** PROFESSIONAL TILE CONTRACTORS, 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** ERICA HENDERSON  
Name (Printed or typed)

9378 ARLINGTON ESPWY # 307  
Address

JACKSONVILLE, FLORIDA 32218  
City, State & Zip

(904) 859-8319  
Daytime Telephone number

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

PROFESSIONAL TILE CONTRACTORS, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
9378 ARLINGTON EXPWY # 307  
JACKSONVILLE, FLORIDA, 32225

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
FOR PROFIT

**ARTICLE IV SHARES**

The number of shares of stock is:  
3000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

ERICA HENDERSON (PRESIDENT)  
TIERRA HENDERSON ( VICE PRESIDENT )  
ERIC HENDERSON ( SECRETARY )

**ARTICLE VI REGISTERED AGENT**

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

ERICA HENDERSON  
1936 WEST 44TH STREET  
JACKSONVILLE, FL. 32209

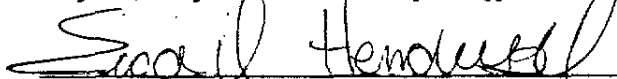
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

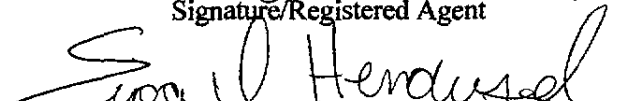
ERICA HENDERSON  
1936 WEST 44TH STREET  
JACKSONVILLE, FL. 32209

\*\*\*\*\*

*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

5-2-05  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5-2-05  
Date

APPROVED  
AND  
FILED  
05 MAY -4 AM 8:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA