# P05000074034

| (Re                     | questor's Name)   |           |
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| (Ćit                    | y/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT            | MAIL      |
| (Bu                     | siness Entity Nan | ne)       |
| (Do                     | cument 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:  | Design (Th                                 | ONC Maked                                  | Vers, Inc   |  |
|---|--|--|---|--|
|   | (FROI OSED CORTORA)                        | TENAME - <u>MOST INCEO</u>                 | DE SUFFIA)  |  |
| Enclosed is 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<br>Filing Fee,<br>Certified Copy<br>& Certificate |  |
|   |  | ADDITIONAL COPY REQUIRED                   |   |  |
| FROM:   | Name (Pr                                   | Tenfyck inted or typed)  (1+h S+n)  ddress |   |  |

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

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

Subject:

HOME MAKEOVERS, INC.

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation, as well as a check for the \$70.00 recording fee of the corporate name.

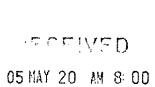
Please forward a certified copy to the address listed below.

From:

HOME MAKEOVERS, INC. 641 49<sup>th</sup> Street North

St. Petersburg, Fl 33710





FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

May 11, 2005

HOME MAKEOVERS, INC. 641 49TH ST NORTH ST PETERSBURG, FL 33710

SUBJECT: HOME MAKEOVERS, INC.

Ref. Number: W05000023970

We have received your document for HOME MAKEOVERS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

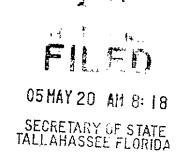
The document number of the name conflict is P05000047179 (HOME-MAKE-OVERS, INC.).

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: 005A00033769



#### ARTICLES OF INCORPORATION

**OF** 

#### DESIGNER HOME MAKEOVERS, INC.

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

#### ARTICLE I: NAME

The name of the corporation shall be:

DESIGNER HOME MAKEOVERS, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

641 49<sup>th</sup> STREET NORTH ST. PETERSBURG, FL 33710

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 Shares at \$ 1.00 dollar par value

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ANN DE WEES ALLEN 641 49<sup>th</sup> STREET NORTH ST. PETERSBURG, FL 33710

#### ARTICLE V: INCORPORATOR (S)

The name and street address of the incorporator (s) to these Articles of Incorporation is:

Ann De Wees Allen 641 49<sup>th</sup> Street North St. Petersburg, FL 33710

Jeffrey Friedman 641 49<sup>th</sup> Street North St. Petersburg, Fl 33710

The undersigned has executed these Articles of Incorporation this 17th day of May 2005.

ANN DE WEES ALLEN
PRESIDENTATICE PRESIDEN

JEFFREY FRIEDMAN SECREPARY/TREASURER

# CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the state of Florida.

1. The name of the corporation is:

| DESIGNER HOME MAKEOVERS, INC.  |
|--|
| 2. The name and address of registered agent and officer is:                        |
| ANN DE WEES ALLEN<br>641 49 <sup>th</sup> STREET NORTH<br>ST. PETERSBURG, FL 33710 |
| The Sollar Mills   |

Signature In School May 12, 2005

HAVING BEEN NAMED AS REGISTERD AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature Us de Was Allos

Date May 17, 2005