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CLERK OF SUPERIOR COURT
STATE OF FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: GARRISON FLOORING 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: TRACEY GARRISON
Name (Printed or typed)

3586 FOUR OAKS BLVD.
Address

TALLAHASSEE, FLORIDA 32311
City, State & Zip

815-405-8310
Daytime Telephone number

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

GARRISON FLOORING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3586 FOUR OAKS BLVD.
TALLAHASSEE, FLORIDA 32311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN THE LEGAL BUSINESS OF FLOOR COVERING SALES AND INSTALLATIONS
AND RELATED SERVICES.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

TRACY GARRISON - 3586 FOUR OAKS BLVD. TALLAHASSEE, FLORIDA 32311 - PRESIDENT

ARTICLE VI REGISTERED AGENT

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

TRACY GARRISON - 3586 FOUR OAKS BLVD. TALLAHASSEE, FLORIDA, 32311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TRACY GARRISON - 3586 FOUR OAKS BLVD. TALLAHASSEE, FLORIDA 32311

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

Date

Signature/Incorporator

Date