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SECTION OF STATE

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TRANSMITTAL LETTER

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

SUBJECT:	KVR TILE, INC.	• %			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Frelosed are an orio	ripal and ana (1) carry of the aut	:-log of:	a chaola form		
Eliciosed are an orig	ginal and one (1) copy of the art	icies of incorporation and	a check for:		
☐ \$70.00 Filing Fee	•	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:		ax Service, Inc. (Printed or typed)			
	705 W Lancaster Rd Address				
	Orlando	, FL 32809			
	City, State & Zip				
		7-5229			
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)

ARTICLE I NAME

The name of the corporation shall be:

KVR TILE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

15 W.CASTLE ST. ORLANDO FL 32809

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TILE

ARTICLE IV SHARES

The number of shares of stock is:

10,000 SHARES AT A PAR VALUE OF \$1.00 EACH.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERTO C, RAMIREZ (PRESIDENT)
15 W.CASTLE ST.
ORLANDO FL 32809

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ROBERTO C.RAMIREZ (REGISTERED AGENT) 15 W.CASTLE ST. ORLANDO FL 32809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERTO C.RAMIREZ (INCORPORATOR)
15 W.CASTLE ST.
ORLANDO FL 32809

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Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agen	e above stated corporation at the place designated in this at and agree to act in this capacity
	8/31/2005
Signature/Registered Agent	Date
	8/31/2005
Signature/Incorporator	Date

