

P05000133457

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/30/05  
BWK

## TRANSMITTAL LETTER

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

**SUBJECT:** ROMAN'S TILE INSTALLATION INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** OSVALDO A. ROMAN  
                                    Name (Printed or typed)

8902 HATFIELD CT.  
                                    Address

TAMPA, FL. 33615  
                                    City, State & Zip

813) 326-6222  
                                    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:

ROMAN'S TILE INSTALLATION INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8902 HATFIELD CT  
TAMPA, FL. 33615

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY BUSINESS OR ACTIVITY PERMITTED  
UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA

## ARTICLE IV SHARES

The number of shares of stock is:

100  
ONE HUNDRED

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

OSVALDO A ROMAN  
8902 HATFIELD CT  
TAMPA, FL. 33615

## ARTICLE VI REGISTERED AGENT

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

RALPH PEREZ  
10921 AIRVIEW DR  
TAMPA, FL. 33625

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OSVALDO A. ROMAN  
8902 HATFIELD CT  
TAMPA, FL. 33615

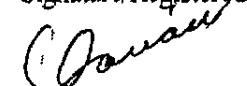
\*\*\*\*\*

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

9/23/05

\_\_\_\_\_  
Date

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

9/23/05

\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA