

Page 00139555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-14-05
WC

COVER LETTER

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

SUBJECT: D Carpet C, 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: Douglas D Curry

Name (Printed or typed)

1970 Georgia Circle N

Address

Clearwater, Florida 33760

City, State & Zip

727-524-6179

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:

D Carpet C, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1970 Georgia Circle N Clearwater Fl 33760

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Carpet, Flooring, Tile and Window Treatment sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Douglas D Curry, President
1970 Georgia Circle N
Clearwater, Fl. 33760

ARTICLE VI REGISTERED AGENT

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


Douglas D Curry
1970 Georgia Circle N
Clearwater, Fl 33760

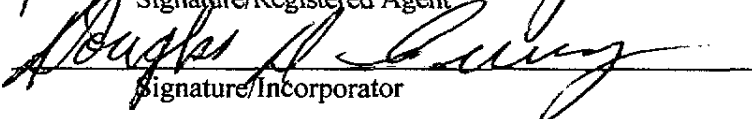
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Douglas D Curry
1970 Georgia Circle N
Clearwater, Fl 33760

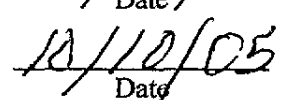
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator



Date


Date

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STATE OF FLORIDA
TALLAHASSEE