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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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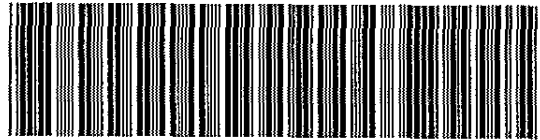
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
06 FEB 16 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 FEB 21

COVER LETTER

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

SUBJECT: AMBOR INTERIORS, 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: AMBOR INTERIORS, INC
Name (Printed or typed)

7925 S.W. 14TH STREET
Address

OCALA, FLORIDA 34474
City, State & Zip

(352) 854-1684
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:

AMBOR INTERIORS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7925 SW 14 STREET
OCALA, FL 34474

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE SOLE AND EXCLUSIVE PURPOSE OF THE COMPANY IS TO PROVIDE QUALITY
SERVICE IN THE AREAS OF REMODELING HOME INTERIORS.

ARTICLE IV SHARES

The number of shares of stock is:

100 INITIAL SHARES OF STOCK AUTHORIZED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DAVID C. SMITH, PRESIDENT/ OWNER
7925 SW 14 STREET
OCALA, FL 34474
(352) 854-1684

ARTICLE VI REGISTERED AGENT

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

DAVID C. SMITH
7925 SW 14 STREET
OCALA, FL 34474

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID C. SMITH
7925 SW 14 STREET
OCALA, FL 34474

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

David C. Smith

Signature/Registered Agent/Incorporator

FEB-14-06

Date

FILED
06 FEB 16 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA