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COVER LETTER

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

SUBJECT: Gino T	ile, Inc (PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an origina	I and one (1) copy of the artic	eles of incorporation and	a check for:
Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Johr	n M Scifo	_	
	Name (Printed or typed)	
14	89 Palm Coast Park	way	
	A	ddress	
<u>Pa</u>	alm Coast, FL 32137	State & Zip	
38	6-446-0317	lenhone 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:

Gino Tile, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

25 Butternut Dr

Palm Coast, FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Residential Tile Layer

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):

Jasmin Dzinic

25 Butternut Dr

Palm Coast, FL 32137

ARTICLE VI REGISTERED AGENT

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

Jasmin Dzinic

25 Butternut Dr

Palm Coast, FL 32137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John M Scifo

1489 Palm Coast Parkway

Palm Coast, FL 33237

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

1000

Date /

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