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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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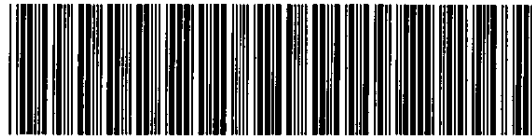
(Business Entity Name)

(Document Number)

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06 MAY 30 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Creative Spaces Interior Design, 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: Robert M. Weber

Name (Printed or typed)

3650 Pond View Ln

Address

Sarasota, FL 34235

City, State & Zip

941-363-0266

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:

Creative Spaces Interior Design, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3650 Pond View Ln
Sarasota, FI 34235

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

providing interior designing services and all things related

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):

President
Robert M. Weber
3650 Pond View Ln
Sarasota, FI 34235

ARTICLE VI REGISTERED AGENT

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

Robert M. Weber
3650 Pond View Ln
Sarasota, FI 34235

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert M. Weber
3650 Pond View Ln
Sarasota, FI 34235

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

Robert M. Weber

Signature/Registered Agent

Robert M. Weber

Signature/Incorporator

5/26/06

Date

9/26/06

Date

FILED
06 MAY 30 PM 4: 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA