

PO6000116882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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COVER LETTER

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

SUBJECT: A PLUS Flooring & Bath 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:

Jaime Ribeiro

Name (Printed or typed)

16524 Silverhill Dr.

Address

TAMPA, FL 33624

City, State & Zip

813-426-7715

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:

A PLUS Flooring & Bath Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

16524 SILVERHILL DR.
TAMPA FL 33624

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

JAIME RIBEIRO

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):

JAIME Ribeiro - PRES.
16524 Silverhill Dr.
Tampa, FL 33624

ARTICLE VI REGISTERED AGENT

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

JAIME Ribeiro
16524 Silverhill Dr.
Tampa, FL 33624

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAIME Ribeiro
16524 Silverhill Dr.
Tampa, FL 33624

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

JAIME RIBEIRO
Signature/Registered Agent

8/2/06
Date

JAIME RIBEIRO
Signature/Incorporator

8/2/06
Date

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