

PO6000119034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

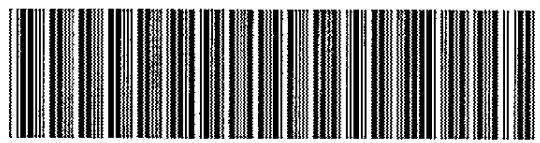
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status     

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09/15/06--01007--005 \*\*78.75

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06 SEP 15 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2006 SEP 15 AM 10:05  
NOT RECORDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

9/15  
JH

COVER LETTER

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

SUBJECT: Michael Nettles Flooring 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: Michael Nettles  
Name (Printed or typed)

1509 Nugent Dr.  
Address

Tallah. Fl. 32301  
City, State & Zip

878-509-6044  
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:

*Michael Nettles Flooring Inc*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

*1509 Nugent Dr. Tall. Fl. 32301*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Flooring*

**ARTICLE IV SHARES**

The number of shares of stock is: *200*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

*Michael Nettles Pres  
1509 Nugent Dr. Tall. Fl. 32301*

**ARTICLE VI REGISTERED AGENT**

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

*1509 Nugent Dr. Tall. Fl. 32301  
Michael Nettles*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Michael Nettles  
1509 Nugent Dr. Tall. Fl. 32301*

\*\*\*\*\*

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

*Michael Nettles*  
Signature/Registered Agent

*9/15/06*  
Date

*Michael Nettles*  
Signature/Incorporator

*9/15/06*  
Date

**FILED**  
08 SEP 15 AM 10:16  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA

To Whom it may concern.

I do not plan on revoking  
the dissolution of Michael Nettles  
Flooring Inc. Doc. # P03-137787.

Michael Nettles

**FILED**  
06 SEP 15 AM 10:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA