

PO6000122702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

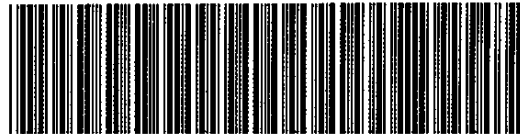
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09-25

## COVER LETTER

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

SUBJECT: **RADD TILE 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: **RICHARD FLOWERS**

Name (Printed or typed)

**716 FLIGHT AVE**

Address

**PANAMA CITY FLORIDA 32404**

City, State & Zip

**850-747-3893**

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:

RADD TILE INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

716 FLIGHT AVE PANAMA CITY, FLORIDA 32404

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

FLOORING

**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):

RICHARD FLOWERS PRESIDENT

DEBBIE FLOWERS VICE PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

RICHARD FLOWERS

716 FLIGHT AVE PANAMA CITY, FLORIDA 32404

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

RICHARD FLOWERS

716 FLIGHT AVE PANAMA CITY, FLORIDA 32404

\*\*\*\*\*  
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

9-20-06  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

9-20-06  
\_\_\_\_\_  
Date

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA