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| (Re | equestor's Name) | |
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| (Ci | ty/State/Zip/Phone | (#) |
| PICK-UP | WAIT | MAIL |
| | isiness Entity Nan | ne) |
| | | |
| (Do | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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2001 AUG 15 A 11: 51 SECRETARY OF STATE

D. WHITE AUG 1 7 2007

COVER LETTER

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

| SUBJECT: Floor Essentials, Inc | | | ·- |
|--|--|--|--------------------------|
| (PROPOSED CORPORAT | TE NAME – <u>MUST INCLU</u> | DE SUFFIX) | |
| Enclosed are an original and one (1) copy of the artic | les of incorporation and | a check for: | |
| \$\bigsize \\$78.75\$ Filing Fee Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy ADDITIONAL COI | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED | |
| FROM: David Smail | | | |
| Name (| Printed or typed) | | |
| P.O. Box 1002 Address | | | |
| Groveland, FL 34736 City, State & Zip | | | · • • • • |
| 352-241-9359 Daytime Te | lephone number | | as so the term seem one. |

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:

Floor Essentials, Inc.

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6525 State Rd 33

P.O. Box 1002

Clermont, FL 34711

Groveland, FL 34736

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell and install flooring products

ARTICLE IV SHARES

The number of shares of stock is:

1000@\$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

David Smail P.O. Box 1002

Groveland, FL 34736

President

REGISTERED AGENT

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

Brenda Lowe

6524 Calvin Lee Rd

Groveland, FL 34736

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Smail

P.O. Box 1002

Groveland, FL 34736

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