P09000040543

(Requestor's Name)
•
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

09 MAY -6 PH 5:





RECEIVED DEPARTMENT OF STATE

09 MAY -6 PH 12: 43 .

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 20, 2009

CONIE UPHOLSTERY 16 PLEASANT HILL LANE TAMARAC, FL 33319

SUBJECT: CONIE UPHOLSTERY & INTERIOR'S DESIGN INC

Ref. Number: W09000018446

We have received your document for CONIE UPHOLSTERY & INTERIOR'S DESIGN INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Regulatory Specialist II

Letter Number: 909A00013209

COVER LETTER

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

SUBJECT:	(PROPOSED CORPOR.	ATE NAME – <u>MUST INCL</u>	LUDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles 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
	Canal	ADDITIONAL CO	PPY REQUIRED
FROM:	16 Pleasant	e (Printed or typed) Address	re
٠.	Tamarac	V, State & Zip	19
	Daytime Daytime	V15 35 Telephone number	<u> </u>

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 HOLSTERY & INTERIOS DESIGNER INC. The name of the corporation shall be: PRINCIPAL OFFICE The principal street address and mailing address, if different is: ENIOR IDME nll land The purpose for which the corporation is organized is: Interios Designee, upholstory Orapenes, Bed Spread & Chair Covers The number of shares of stock is: しつつ INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): SENIOR IDDICE lle pleasan Hill Lane Tamarac 4 33319 The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Lane 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