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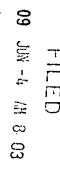
(Requestor's Name)			
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PICK-UP WAIT MAIL			
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## **COVER LETTER**

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

SUBJECT:	Tile Care			
Enclosed are an orig	(PROPOSED CORPORA			
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Ronald Jo Name (		ind_	
	TAMBA PI City, 813 20	49 2135		
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 <u>NAME</u> The name of the corporation shall be: Tibe care RX INC ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 110 Duval Dr TAMPA 71. 33615 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Tile INSTAll & repair ARTICLE IV SHARES The number of shares of stock is: 106 INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): RONALD JON TOWNSEND PRES 110 Duvaler ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Monald LONTOWNSEND Pres 110 Dural de ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Rovald Son Town SEND 110 Durallar TAMAN FLA 33615 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, Lam familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

4.28-09

4. 29-09