P09000067561

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me) .
(Do	cument Number)	· .
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer.		

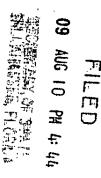
Office Use Only

W09000D34122



200158738602

07/23/09--01026--010 **78.75



11ch 8-11-09

COVER LETTER					
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	RES	UBMITING C =#:W09000	.ORP NAME 0034122		
SUBJECT:	BE-VO F (PROPOSED CORPORA	TOOR COVER	ING ING.		
Enclosed are an original a	and one (1) copy of the arti	cles of incorporation and	a check for:		
Filing Fee Fil	\$78.75 ling Fee Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM:	BE VORAS	SARN (Printed or typed)		09	
		ARLY LE PD. Address	第一章 第二章 第二章	AUG 10 PH	
	TAM	PA FU 33619 State & Zip	5 E	4:	
	727	-422-6929 Gelephone number	4	45	

NOTE: Please provide the original and one copy of the articles.

Joneny 99@ yahoo . Com E-mail address: (to be used for future annual report notification)



July 27, 2009

BE VORASARN 4411 CARLYLE RD. TAMPA, FL 33615

SUBJECT: BE FLOOR COVERING INC.

Ref. Number: W09000034122

We have received your document for BE FLOOR COVERING INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney OPS Clerk

Letter Number: 109A00025700



CORPORATE DETAIL RECORD SCREEN

1:41 PM

8/10/09 (**) NUMBER: W09000034122

REJECTED FILING REJ: 07/23/2009

NAME : BE FLOOR COVERING INC.

SUBMIT BY: BE VORASARN ADDRESS : 4411 CARLYLE RD.

TAMPA, FL 33615

USER ID

: NHANEY

RECEIVED AUG 1 0 2009

1. MENU

ENTER SELECTION AND CR:

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: BE-VO FVOOR COVE	FING INU.
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: HHII CARLYLE PD. TAMPA FU	33615
ARTICLE III PURPOSE The purpose for which the corporation is organized is: COVENING TO PROVIDE TWOR SERVICES	99 A
ARTICLE IV SHARES The number of shares of stock is:	AUG TO PA
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): BE VORASARI HIII CARLYLE PD. TAMPE	FU 33615 (PRES,
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered RELYLERD. TAMPA	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: BE VORASARN 4411 CARLYLE PD. TAMPA	FL 33615
**************************************	**************************************
Signature/Registered Agent	8.3.09 Date

Signature/Incorporator

Date