

P09000102994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

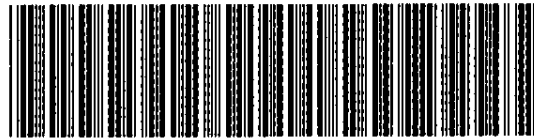
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TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2009 DEC 29 AM 10:47

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## COVER LETTER

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

SUBJECT: Scotts Quality Flooring 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: Scott H Castleton

Name (Printed or typed)

1894 NENA hills Dr ~~###~~

Address

Tallahassee, FL, 32304

City, State & Zip

559-5212

Daytime Telephone number

S.H.Castleton @ AOL . com

E-mail address: (to be used for future annual report notification)

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

Effective 1-1-10  
Date shall Be

## 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: *Scotts Quality Flooring Inc*

### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

*1894 Nena hills Dr Tall FL 32304*

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *Flooring*

### ARTICLE IV SHARES

The number of shares of stock is: *1000*

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*P Scott H Castleton*  
*1894 Nena hills Dr Tall FL 32304*

### ARTICLE VI REGISTERED AGENT

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

*Scott H Castleton 1894 Nena hills Dr Tall FL*  
*32304*

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Scott H Castleton 1894 Nena hills Dr Tall FL 32304*

\*\*\*\*\*

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

*Scott H Castleton*  
\_\_\_\_\_  
Signature/Registered Agent

*12-29-09*  
\_\_\_\_\_  
Date

*Scott H Castleton*  
\_\_\_\_\_  
Signature/Incorporator

*12-29-09*  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA

00 DEC 29 AM 10:50

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