

PI 00000094506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

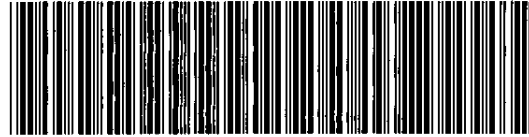
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Certificates of Status \_\_\_\_\_

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Effective Date NOV. 16, 2010

FILED  
2010 NOV 17 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch NOV 18 2010

## COVER LETTER

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

SUBJECT: HYLIA CARPET & TILE 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 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: LEE Johnson  
Name (Printed or typed)

1125. N.W. 15<sup>th</sup> STREET  
Address

Ft. Lauderdale FL. 33311  
City, State & Zip

754-423-3064  
Daytime Telephone number

MZ JACKPOT1 @ AOL. Com  
E-mail address: (to be used for future annual report notification)

**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: MYLIA CARPET & TILE Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1125 NW 15<sup>th</sup> St  
Ft. Lauderdale FL 33311

Mailing address, if different is:

**ARTICLE III PURPOSE**

Please allow effective date to be , November 16th, 2010

The purpose for which the corporation is organized is:

Labor (Inflation)  
Service only

Effective Date NOV. 16, 2010

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: (P) MR. LEE JOHNSON

Address: 1125 NW 15<sup>th</sup> St  
Ft. Lauderdale FL 33311

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: MR. President LEE JOHNSON

Address: 1125 NW 15<sup>th</sup> STREET  
Ft. Lauderdale FL 33311

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: DEBORAH KNOWLES  
Address: 4241 NW 19<sup>th</sup> Unit 150  
Lauderhill FL 33313

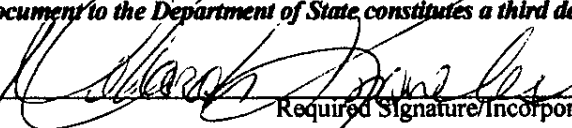
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

11/12/10  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

11/12/10  
Date

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