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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
2010 DEC 13 PM 12:37

12/14/10

COVER LETTER

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

SUBJECT: Jeff Foster's Wallcovering, 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: Jeff Foster

Name (Printed or typed)

1508 Blue Point Ave

Address

Naples, FL 34102

City, State & Zip

239-269-3678

Daytime Telephone number

tracyfoster826@gmail.com

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

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

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DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Jeff Foster's Wallcovering, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

1508 Blue Point Ave
Naples, FL 34102

Mailing address, if different is:

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DIVISION OF CORPORATIONS

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional corporation.

ARTICLE IV SHARES

The number of shares of stock is: 7500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jeff Foster, President/Owner

Address: 1508 Blue Point Ave
Naples, FL 34102

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:

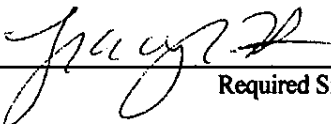
Name: Tracy Foster
Address: 1508 Blue Point Ave
Naples FL 34102

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tracy Foster
Address: 1508 Blue Point Ave
Naples, FL 34102

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

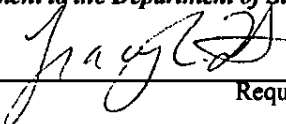


Required Signature/Registered Agent

12.9.10

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

12.9.10

Date