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(Req	uestor's Name)	
(Add	ress)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

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OEPAL TEHT OF STATE
IVISION OF CORPORATIONS
TALL AMASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: TILE Illussi	ions Inc
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
	·
FROM: 7/0yd Willo	e (Printed or typed)
514 Big Rici	hard Kd Address
Tallahassee 7	1 32 3100 State & Zip
850 421-1181 Daytime 7	elephone number
	dor future annual report politication)

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)

The name of the corporation shall be: TILE IIIUSS io	ns Itc
ARTICLE II PRINCIPAL OFFICE Principal street address SIY B. J. Ric Laco Ro Talianas See 71	Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Ceramic Tile Installation	TALLAHASSEE
ARTICLE IV SHARES The number of shares of stock is:	OF STATE E. FLORIDA
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: 7/040 Dicker's president Nam Address: Add	ress:
Name and Title: Jeff Bradley Address: 1805 Rosedale do Add Talabassee Fla 32303	ne and Title:ress:
Name and Title: Nam Address: Add	ne and Title:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the reg Name: Address: 514 Bis Kichsid Rd 79(64555555 71) 2000	gistered agent is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Zlog d dickens Address: SIY Bij Richard Kd TG/194955C171 32310	
Having been named as registered agent to accept service of process for the this certificate, I am familiar with and accept the appointment as registered	
The dela	-//- (Date
Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true, document to the Department of State constitutes a third degree felony as pro-	I am aware that the false information submitted in a
Play Dician Required Signature/Incorporator	1-11-11