## P11000063978

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Olly/State/Zip/) Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Decument Niverban)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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## **COVER LETTER**

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

SUBJECT: ROPOSED CORPORAT	MATON, INC. TE NAME - MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75  Filing Fee  & Certified Copy  & Certificate of  Status  ADDITIONAL COPY REQUIRED
_8817 Fine Tr	(Printed or typed)  Pe Drve  ddress
Lateland City, S	ddress  4. 33809  State & Zip  3. 8479  Elephone number

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	on shall be:	Installation	, Inc.		
	CIPAL OFFICE Principal street address		Mailing address, if different is:		
881° Lai	TPine Tree Drye Gland, Fr. 33	,			
ARTICLE III PURP The purpose for which the	e corporation is organized is	: (carpet, woo	d, vinyl)		
ARTICLE IV SHAP	iock is: 100	DIDECTORS			
Name and Title: K	al officers and/or ichard Alls - Pre 817 Pine Tree Do okgland, Pl. 33	Sident Name and Ti	itle:		
Name and Title: Address:		Address:	itle:		
			itle:		
	STERED AGENT Teet address (P.O. Box NOT JEAN FIRE ALLS SELT PIPE THE DE LOKELLAND, FL 3:	acceptable) of the registered a	agent is:		
ARTICLE VII INCO The name and address of Name: Address:		176 133809	PH 2: 30	- ' - '	
			stated corporation at the place designated in this capacity	in	
In	Required Signature/Register	red Agent	7-10-11 Date		
		ed herein are true. I am awa I degree felony as provided fo		а	
Innat	Required Signature/Incorp	norator	7-10-11 Date		
/ / /	)	r	Duto		