

P12000081987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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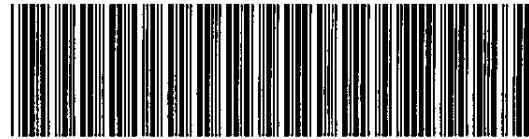
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/26/12--01021--015 **78.75

FILED
12 SEP 26 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FL 32311

T. Burch SEP 27 2012

COVER LETTER

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

SUBJECT: Mr. Wright 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 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: MD Wright

Name (Printed or typed)

7186 Esther Street

Address

Jacksonville, FL 32210

City, State & Zip

(904) 476-5327

Daytime Telephone number

n/a

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:

Mr. Wright Flooring, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
7186 Esther Street
Jacksonville, FL 32210

Mailing address, if different is:

n/a

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marquis D. Wright, P/S/T
Address: 7186 Esther Street
Jacksonville, FL 32210

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: MD Wright
Address: 7186 Esther Street
Jacksonville, FL 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MD Wright
Address: 7186 Esther Street
Jacksonville, FL 32210

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

Marquis Wright

Required Signature/Registered Agent

9/22/12

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.

Marquis Wright

Required Signature/Incorporator

9/22/12

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA