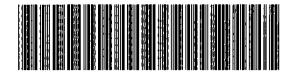
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(Red	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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COVER LETTER

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

SUBJECT:	Olando Ti (Proposed corpor	le Install atename-must incli	CE INC UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l 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	
·			

Name (Printed or typed)

Name (Printed or typed)

Name (Printed or typed)

Address

City, State & Zip

Daytime Telephone number

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

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be:	Tile Installer Inc
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
41310 Partridge De	
Tampa, FI	
00165	•
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	ie Installer in
Home, buisness, u	Darehouse, ect.
	<u> </u>
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	President
	Name and Title:
Address 11310 Lartroge	Naddress:
Jampa, F1 3362	5
Name and Title:	Name and Title:
Address	Address:
N. 1779	N 170'd
	Name and Title:
Address	

Name and	Title:	Name and Title:	
Address		Address:	FILED
	Manufacture and the second	_	13 NOV 18 PH 12: 45
			SECRETARY OF STATE
			TALLAHASSEE, FLORIDA
	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	kolando tere	<u> </u>	
Address:	11310 Partride	DR	
	toma EID	21075	
		<u></u>	
ARTICLE VII	INCORPORATOR		
The name and add	dress of the Incorporator is:		
Name:	Rolando Pereir	za	
Address:	11310 Partridge	e De.	
	Tama, F1 33	bler5	
Having been name this certificate, I an	ed as registered agent to accept service of proces in familiar with and accept the appointment as re	ss for the above stated corp egistered agent and agree to	poration at the place designated in o act in this capacity
-41	Required Signature/Registered Agent	<u> </u>	11-14-2013
	Required Signature/Registered Agent		Date
	ment and affirm that the facts stated herein are epartment of State constitutes, a third degree felo		
	Balle Por	ا کری	11-14-2013
	Required Signature/Incorporator		Date