## P13000099933

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| , <b>(A</b> d           | ldress)            |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | ÷ #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nar  | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
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Office Use Only



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SECRETARY OF STATE
STORE TARY OF STATE
STATE OF CORPORATION

i/H

Efective Date
COVERLETTER

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

SUBJECT: GATOR CARPET ONE INC 2 CORP
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| <b>5</b> 70.00 | <b>\$78.7</b> 5         | \$78.75                 | \$87.50       |
|----------------|-------------------------|-------------------------|---------------|
| Filing Fee     | Filing Fee              | Filing Fee              | Filing Fee,   |
| ,              | & Certificate of Status | & Certified Copy        | Certified Cop |
| •              |                         |                         | & Certificate |
|                |                         |                         | Status        |
|                | ·                       | ADDITIONAL COPY REQUIRE |               |

| FROM: DONALD CONATSEY II  Name (Printed or typed) |
|---|
| 2115 South Ridge wood AK                          |
| Edge WATER F1 32141 City, State & Zip             |
| 386 409 9050 Daytime Telephone number             |
| DONATION 11@ GMAIL COM                            |

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

841656295 Ein Number - SCORP

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

| ICLE II PRI   | INCIPAL OFFICE Principal street address  | Mailing addras  | ss, if different is:                    |  |
|---|--|---|---|--|
| )    - · -  | • ———  | ·   | ss, il different is.                    |  |
| 115 50<br>19ewa                                     | Ter Fl   | EEEECTIVE D   | DATE 1/1/2                              | 0/   |
| 32/3  | <del>-</del> 1   |   |   |  |
| ICLE III PUR<br>urpose for which                    | the corporation is organized is:   | Profit  |   |  |
|   |  |   | N3                                      | تنا  |
|   |  |   | ======================================= | NSIA   |
|   |  |   |   | JH OF  |
|   |  |   | <u> </u>                                | 100E   |
|   |  |   | -                                       |  |
|   |  |   |   | 0.3  |
|   |  | ,   | 9                                       | HORATH   |
| ICLE IV SH  | ARES   |   |   | HORATION   |
| ICLE IV SH<br>umber of shares o                     | ARES<br>f stock is: 1500   | •   |   | ORATION  |
| umber of shares o                                   | f stock is: 1-500  | ,<br>,<br>  |   | HORATION   |
| umber of shares o                                   | f stock is: 1.500  TIAL OFFICERS AND/OR DIRECTORS  |   | 9: 3 <b>4</b>                           | HORATION .   |
| umber of shares o  ICLE V INI  Name and Tit         | f stock is: 1500  TIAL OFFICERS AND/OR DIRECTORS  16: DONALD COMATSERIT  | Name and Title: Presi                                     | 9: 3 <b>4</b>                           | ORATION  |
| umber of shares o                                   | THAL OFFICERS AND/OR DIRECTORS  10:DONALD SONATSENT  2115 South Wood   | Name and Title: Presi                                     | 9: 3 <b>4</b>                           |  |
| umber of shares o  ICLE V INI  Name and Tit         | f stock is: 1500  TIAL OFFICERS AND/OR DIRECTORS  16: DONALD COMATSERIT  | Name and Title: Presi                                     | 9: 3 <b>4</b>                           |  |
| umber of shares o  ICLE V INI  Name and Tit         | THAL OFFICERS AND/OR DIRECTORS  10:DONALD SONATSENT  2115 South Wood   | Name and Title: Presi                                     | 9: 3 <b>4</b>                           | 02A 108  |
| umber of shares o  ICLE V IN  Name and Tit  Address | TIAL OFFICERS AND/OR DIRECTORS  10:DONALD CONATSENT  2115 South Wood  Exqewater fl                                     | Name and Title: President Address:                        | 1.ev+                                   | The state of the s |
| ICLE V IN  Name and Tit  Address  Name and Titl     | restriction of the stock is: 1500  TIAL OFFICERS AND/OR DIRECTORS  10: DONALD CONATSENT  2115 South Wood  Exqewater fl | Name and Title: President Address:  Name and Title:       | 1.ev+                                   |  |
| umber of shares o  ICLE V IN  Name and Tit  Address | TIAL OFFICERS AND/OR DIRECTORS  10:DONALD CONATSENT  2115 South Wood  Exqewater fl                                     | Name and Title: President Address:  Name and Title:       | 1.ev+                                   | The state of the s |
| ICLE V IN  Name and Tit  Address  Name and Titl     | restriction of the stock is: 1500  TIAL OFFICERS AND/OR DIRECTORS  10: DONALD CONATSENT  2115 South Wood  Exqewater fl | Name and Title: PRS ( Address:  Name and Title:  Address: | 1.ev+                                   | Total Park   |
| ICLE V IN  Name and Tit  Address  Name and Titl     | TIAL OFFICERS AND/OR DIRECTORS  10:DONALD CONATSERT  2115 South Wood  Exqewaterfl  c:                                  | Name and Title: PES ( Address:  Name and Title:  Address: | 1 ent                                   | The state of the s |
| Name and Tit  Address  Name and Titl  Address       | THAL OFFICERS AND/OR DIRECTORS  10:DONALD SONATSENT  2115 South Wood  Exqewaterfl  c:                                  | Name and Title: PRS ( Address:  Name and Title:  Address: | Jent                                    | and the second s |
| Name and Tit  Address  Name and Titl  Address       | TIAL OFFICERS AND/OR DIRECTORS  1e:DONALD CONATSENT  2115 South Wood  Exqewater fl                                     | Name and Title: Pest                                      | Jent                                    |  |

FILED SECRETARY OF STATE DIVISION OF CORPORATION

| Name and Title:   | Name and Title: 2019 DEC        | The AM Or St. |
|---|---------------------------------|---------------|
| Address   | Address:                        |               |
| ·   | <u> </u>                        |               |
|   |                                 |               |
|   |                                 |               |
| ARTICLE VI REGISTERED AGENT   |                                 |               |
| The name and Florida street address (P.O. Box NOT acceptab  | le) of the registered agent is: |               |
| Name: DONALD CONATS   | or I                            |               |
| Address: 2115 South Ridge   | e wood Av                       |               |
| Address: 2115 South Ridge<br>Edgewater HS   | 32141                           |               |
| ARTICLE VII INCORPORATOR  |                                 |               |
| The name and address of the Incorporator is:  |                                 |               |
| Name: DONALD CONATSE  |                                 |               |
| Address: 2/15 So Ridge wood A   | <u>v</u>                        |               |
| EdgeWATER FI 3214   | 4) .                            |               |
| Having been named as registered agent to accept service of pr<br>this certificate, I am familiar with and accept the appointment to |                                 |               |
| Required Signature/Registered Agent   |                                 | 12-10-13      |
| Required Signature/Registered Agent   |                                 | Date          |
| I submit this document and affirm that the facts stated herein document to the Department of State constitutes a third degree       |                                 |               |
| X D, Conatar 2-II  Required Signature/Incorporator  |                                 | 12-10-13      |
| Required Signature/Incorporator   |                                 | Date          |
|   |                                 |               |