

P 140000/2012

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP    WAIT    MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 FEB - 3 AM 10: 25

g 2/10/14

**COVER LETTER**

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

SUBJECT: BAYSHORE FLOORS 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: WAYNE KUKAR  
Name (Printed or typed)

494 40TH AVE N.  
Address

ST. PETERSBURG, FL. 33703  
City, State & Zip

727) 687-6232  
Daytime Telephone number

WAYNEHK68@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

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

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

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SECRETARY OF CORPORATIONS  
14 FEB -3 AM 10:25

**ARTICLE I NAME**

The name of the corporation shall be: BAYSHORE FLOORS INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

494 40TH AVE N.

ST. PETERSBURG

FL. 33703

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: CARPET INSTALLATION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JULIA WHITE (P) Name and Title: \_\_\_\_\_

Address 494 40TH AVE N. Address: \_\_\_\_\_

ST. PETERSBURG

FL. 33703

Name and Title: WAYNE KUKAR (VP) Name and Title: \_\_\_\_\_

Address 494 40TH AVE N. Address: \_\_\_\_\_

ST. PETERSBURG

FL. 33703

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JULIA WHITE  
 Address: 494 40TH AVE N.  
ST. PETERSBURG, FL. 33703

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: WAYNE KUKAR  
 Address: 494 40TH AVE N.  
ST. PETERSBURG FL 33703

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

Julia White  
 Required Signature/Registered Agent

1/31/14  
 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.

W Kukar  
 Required Signature/Incorporator

1/31/2014  
 Date

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