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FLORIDA PROFIT/NON PROFIT CORPORATION

M R CARPET INSTALLATIONS, INC.

Certificate of Status	0
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Page Count	03
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

name of the corpor	ME ation shall be: MR CARPET	INSTALLATIO	ONS, INC.	
335 W. 49	INCIPAL OFFICE Principal street address PL	Mailing address, if different is:		
PT: 218 TOV	VER 3			
ALEAH, FL	33012			
	RPOSE the corporation is organized is: ALL LAWFUL BUSINE	SS		
·				
	TIAL OFFICERS AND/OR DIRECTO	RS Name and Title:		
number of shares of	TIAL OFFICERS AND/OR DIRECTO  MANUEL RIBEIRO (P/S/D)  1335 W 49 PL	<del></del>	FILE DUL 22 MIII	
TICLE V IN	TIAL OFFICERS AND/OR DIRECTO	Name and Title:	FILE DUL 22 MI	
number of shares of TICLE V IN.  Name and Tit  Address	TIAL OFFICERS AND/OR DIRECTOR  MANUEL RIBEIRO (P/S/D)  1335 W 49 PL  APT: 218 TOWER 3	Name and Title: Address:	JUL 22 MILE 41	
number of shares of TICLE V IN.  Name and Tit  Address	TIAL OFFICERS AND/OR DIRECTOR  (TIAL OFFICERS AND/OR DIRECTOR  (Inc.) MANUEL RIBEIRO (P/S/D)  1335 W 49 PL  APT: 218 TOWER 3  HIALEAH, FL 33012	Name and Title: Address:  Name and Title:	JUL 22 MILE 41	
TICLE V IN.  Name and Tit  Address  Name and Titl	TIAL OFFICERS AND/OR DIRECTOR  (TIAL OFFICERS AND/OR DIRECTOR  (Inc.) MANUEL RIBEIRO (P/S/D)  1335 W 49 PL  APT: 218 TOWER 3  HIALEAH, FL 33012	Name and Title: Address:  Name and Title:	JUL 22 MILE 41	
TICLE V IN  Name and Tit  Address  Name and Titl  Address	TIAL OFFICERS AND/OR DIRECTOR  WANUEL RIBEIRO (P/S/D)  1335 W 49 PL  APT: 218 TOWER 3  HIALEAH, FL 33012	Name and Title:  Address:  Name and Title:  Address:	JUL 22 MILLS 4II	
TICLE V IN  Name and Tit  Address  Name and Titl  Address	TIAL OFFICERS AND/OR DIRECTO  Ie: MANUEL RIBEIRO (P/S/D)  1335 W 49 PL  APT: 218 TOWER 3  HIALEAH, FL 33012	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	JUL 22 MILLS 4II	

(oonti.)

Name a	and Title:	Name and Title:	
Addres	ss	Address:	
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
lame:	MANUEL RIBEIRO	0 0	
Address:	1335 W 49 PL APT: 218 TOWER 3	•	in a m
	HIALEAH, FL 33012	<del>-</del>	22 Mag
RTICLE VII	INCORPORATOR		M II: 4
he <u>name and i</u>	address of the Incorporator is: .		SH E
Name:	MANUEL RIBEIRO	_	<del>_</del>
Address:	1335 W 49 PL APT: 218 TOWER 3	_	
	HIALEAH, FL 33012	<u>-</u>	
	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg		
l.	Required Signature Registered Agent		7/22/14
	Required Signature/Registered Agent		/ Date
submit this de	ocument and affirm that the facts stated herein are e Department of State equisitivites a third degree felon	true. I am aware that th	ne false information submitted in 7.155, F.S.
1/1	Land Dilee	,	7/22/14