P15000048206

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	÷#)		
	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

W15-35469



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05/14/15--01010--021 **78.75

SECRETARY OF STATE OF CORPORATION

a 05/01/15



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2015

VALERIE BARTHELUS 8103 SOUTHGATE BLVD. NORTH LAUDERDALE, FL 33068

SUBJECT: MILLER'S TILE & MARBLE INC.

Ref. Number: W15000035469

We have received your document for MILLER'S TILE & MARBLE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P02000108482 (MILLER TILE & MARBLE INC.).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 015A00010523

COVER LETTER

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

SUBJECT: MILLE	ER'S TILE & MARBLE INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	ticles of incorporation and	d 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 CO	DPY REQUIRED
FROM:	ALERIE BARTHELUS Nam O3 SOUTHGATE BLVD	e (Printed or typed)	
		Address	
NO.	DRTH LAUDERDALE, FL 33068		
	City	, State & Zip	
754	4-366-2577		
	Daytime 7	Telephone number	
VG	BUSINESSCLASS@HOTMAIL.CO	OM	
	E-mail address: (to be use	d 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 corpora	tion shall be: SNAPPER'S TI	LEE, HAG	PBLE INC. MANY	تعدابه
ARTICLE II PRINC 8103 SOUTHGATE BI	CIPAL OFFICE Principal <u>street</u> address LVD	I	Mailing address, if different is:	
NORTH LAUDERDAI				
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is: Tile	é Marble	Installation	
				OIVISION OF CORPO
ARTICLE IV SHAR. The number of shares of				PH12: 59
	AL OFFICERS AND/OR DIRECTORS EXAMPLE BARTHELUS	Name and Title	DONAVAN MILLER	
Address 8	8103 SOUTHGATE BLVD	Address: 8103 SOUTHGATE BLV		'D
	NORTH LAUDERDALE, FL 33068		NORTH LAUDERDALE,	FL 33068
Name and Title		Name and Title		
Address		Address:		
Name and Title	·	Name and Title		
Address		Address:		

Name ar	nd Title:	Name and Title:	
Address	S	Address:	
ARTICLE VI	REGISTERED AGENT		
The <u>name and F</u>	lorida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	VALERIE BARTHELUS		_
Address:	8103 SOUTHGATE BLVD		3€ 0 V S 15
	NORTH LAUDERDALE, FL 33068		ECRETA ISION OF
			FILE OF CO
ARTICLE VII	<u>INCORPORATOR</u>		or Side Rivorali PH 12:
The name and a	ddress of the Incorporator is:		5. 5. 1. 1. 1. 1. 1. 1. 1. 1
	VALERIE BARTHELUS		5
Name:			
Address:	8103 SOUTHGTE BLVD		
	NORTH LAUDERDALE, FL		
Effective date, if	EFFECTIVE DATE: other than the date of filing: date is listed, the date must be specific and calling.)	(OPTIONAL) nunot be more than five business days p	orior or 90 business
	e inserted in this block does not meet the application of State on the Department of State's reco		te will not be listed as
Having been nat	med as registered agent to accept service of pro am familiar with and accept the appointment a	ocess for the above stated corporation at s registered agent and agree to act in this	the place designated in capacity
Valeu	Required Signature/Registered Agent	<u>5</u>	Date
	cument and affirm that the facts stated herein Department of State constitutes a third degree j		rmation submitted in a
1)alere	i Buthelus ired Signature/Incorporator		11) 15 Date