## P16000016703

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
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(Document Number)				
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## **COVER LETTER**

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

SUBJECT: EURO	PEAN DESIGNS INC.			
SOBSECT.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an or	iginal and one (1) copy of the arti	icles of incorporation and	l a check for:	
□ \$70.00 Filing Fee	\$78.75	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
K	ERRIE MILEY			
FROM:	Name	e (Printed or typed)		
52	09 LAKEHURST COURT			
		Address	<u> </u>	
PA	ALMETTO, FL 34221			
_	City,	State & Zip		
94	1-809-3379			
_	Daytime Telephone number			
El	JROPEANDESIGNSINC@GMAIL.C	COM		
	E-mail address: (to be use	d for future annual report	notification)	

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 1, 2016

KERRIE MILEY 5209 LAKEHURST COURT PALMETTO, FL 34221

SUBJECT: EUROPEAN DESIGNS INC.

Ref. Number: W16000006944

We have received your document for EUROPEAN DESIGNS 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

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 P13000018452 - EUROPEAN DESIGN INC.

Please return 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.

Teresa Brown Regulatory Specialist II

Letter Number: 816A00002113

## ARTICLES OF INCORPORATION

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

TICLE I NAM name of the corpo	NCIPAL OFFICE		9 x 8 x 1
	Principal street address		Mailing address, if different is
39 61ST			KEHURST COURT %
RASOTA, FL 342	43	PALMET	TO, FL 34221
= =			
TICLE III PUR e purpose for which	POSE h the corporation is organized is:	HE DESIGN AND INS	TALLATION OF EUROPEAN
BINETRY AND	ALLIED PRODUCTS		
	<u>.</u>		
TICLE IV SHA			
e number of shares	of stock is: <u> IAL OFFICERS AND/OR DIRECTORS</u> KERRIE E MILEY - QUALER O	Siden Name and Title	WILLIAM C SMITH - Pravid
e number of shares	of stock is:	Siden Name and Title Address:	WILLIAM C SMITH — Provid
e number of shares  TICLE V INIT  Name and T	of stock is:	Name and Title	
e number of shares  TICLE V INIT  Name and T	of stock is:  CIAL OFFICERS AND/OR DIRECTORS  itle:  5209 LAKEHURST COURT	Name and Title	1728 BIRCHWOOD STREET
e number of shares  TICLE V INIT  Name and T  Address	of stock is:  CIAL OFFICERS AND/OR DIRECTORS  itle:  5209 LAKEHURST COURT	Address:	1728 BIRCHWOOD STREET  SARASOTA, FL 34231
e number of shares  TICLE V INIT  Name and T  Address	of stock is:  TAL OFFICERS AND/OR DIRECTORS  KERRIE E MILEY - OWNER  5209 LAKEHURST COURT  PALMETTO, FL 34221	Address:  Name and Title	1728 BIRCHWOOD STREET  SARASOTA, FL 34231
Name and Ti	of stock is:  FIAL OFFICERS AND/OR DIRECTORS itle:  KERRIE E MILEY - OWNER  5209 LAKEHURST COURT  PALMETTO, FL 34221	Address:  Name and Title  Address:  Address:  Address:	1728 BIRCHWOOD STREET  SARASOTA, FL 34231
Name and Ti	of stock is:  TAL OFFICERS AND/OR DIRECTORS  Itle:  KERRIE E MILEY - OWNER  5209 LAKEHURST COURT  PALMETTO, FL 34221  Itle:	Address:  Name and Title  Name and Title  Address:	1728 BIRCHWOOD STREET  SARASOTA, FL 34231
Name and Ti Address  Address	of stock is:  FIAL OFFICERS AND/OR DIRECTORS itle:  KERRIE E MILEY - OWNER  5209 LAKEHURST COURT  PALMETTO, FL 34221	Address:  Name and Title  Name and Title  Address:	1728 BIRCHWOOD STREET  SARASOTA, FL 34231

Name an	d Title:	Name and Title:
Address		Address:
	REGISTERED AGENT	1. S. of the constraint of the constraint
	orida street address (P.O. Box NOT acceptab KERRIE MILEY	ie) of the registered agent is:
Name:	5209 LAKEHURST COURT	<del></del>
Address:	PALMETTO, FL 34221	<del></del>
	TALMETTO, TE 34221	<del></del>
ARTICLE VII	<u>INCORPORATOR</u>	
•	Idress of the Incorporator is:	
	KERRIE MILEY	
Name:	5209 LAKEHURST COURT	
Address:	PALMETTO, FL 34221	<del></del>
Effective date, if (If an effective d days after the fil	ing.)	annot be more than five business days prior or 90 business able statutory filing requirements, this date will not be listed as
Having been nan	ned as registered agent to accept service of pro am familiar with and accept the appointment a	ocess for the above stated corporation at the place designated in is registered agent and agree to act in this capacity
	Required Signature/Registered Agent	Date
	~	are true. I am aware that the false information submitted in a
The no		1/8/10
Requir	red Signature/Incorporator	Date

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