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COVER LETTER

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

SUBJECT:	Jeremy Johnso	N Flooring	INC.
	(PROPOSED CORPORA	TE NAME - MUST INCL	JDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	I a check for:
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
	Jesemy Miche	· (
<u></u>	0237 Quarter Lorse Tr	Address	
<u> </u>	Tallehassee FL 3 City	2309 State & Zip	
	850 - 264-4419 Daytime	Telephone number	
<u>.</u> . <u>.</u>	Jerenn M Johns E-maj address: (to be use	50N 28 @ 9 ma	ail.com

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

	will not reinstate Jeremy Johnson Floring INC
1. 12 Jemin Michael Johlson	will not reinstate Jeremu Johassou 1 Micros Loc
1 Oct of the transfer of the second	-
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Document number <u>P170000 H710い3</u>.

And will file a new filing with the same name.

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

name of the corpora	<u>CIPAL OFFICE</u> Principal street add	dress		}	Mailing address	, if different is:	
	Principal <u>street</u> ad	<u> </u>	-	1	Same		
<u> Tallahase</u>	ue FL		_			, , , , , , , , , , , , , , , , , , ,	
32309							
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FICLE III PURP purpose for which	<u>OSE</u> the corporation is o	rganized is:	INT	erior	remo	del	
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number of shares o	f stock is:		ORS 1	_ _			
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	f stock is:	VD/OR DIRECT Johnson F			;		
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Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT a	acceptable) of the registered agent is:
Name: Jeremy Johnson	
Name: <u>Jeremy Johnson</u> Address: <u>10237 Doarterhorse</u>	TR
32300 Talbiasse	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	, , , , , , , , , , , , , , , , , , ,
-Name: <u>Jeremy John</u> Address: <u>6237 Questerhor</u>	<u>≺ον</u>
32309 Tallahasse	<u>FL</u>
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specifiling.)	. (OPTIONAL) ic and cannot be more than five days prior or 90 days after the
<u>Note:</u> If the date inserted in this block does not meet the document's effective date on the Department of Sta	he applicable statutory filing requirements, this date will not be listed as tte's records.
Having been named as registered agent to accept serv this certificate, I am familiar with and accept the appoint	ice of process for the above stated corporation at the place designated in intment as registered agent and agree to act in this capacity
Required Signature/Register	11-27-18
	ed Agent Date
I submit this document and affirm that the facts state document to the Department of State constitutes a third	ed herein are true. I am aware that the false information submitted in a $\cdots = \infty$ 4 degree felony as provided for in s.817.155, F.S.
2	//-27-18
Required Signature/Incorporator	Date

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