

P1900004363

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : FANJUL CPA, INC.
Account Number : I20130000039
Phone : (305)244-0769
Fax Number : (877)503-6086

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SMART CARPET SOLUTIONS CORP

Certificate of Status	0
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2019 MAY 28 AM 11:06

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MAY 29 2019

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: SMART CARPET SOLUTIONS CORP

ARTICLE II PRINCIPAL OFFICEPrincipal street address
4250 SW 67TH AVENUE APT 48

MIAMI, FL 33155

Mailing address, if different is:

4250 SW 67TH AVENUE APT 48

MIAMI, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DIANA VELAZQUEZ-P

Address: 4250 SW 67TH AVENUE APT 48
MIAMI, FL 33155

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

2019 MAY 28 10:11:06

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DIANA VELAZQUEZ

Address: 4250 SW 67TH AVENUE APT 48

MIAMI, FL 33155

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: DIANA VELASQUEZ

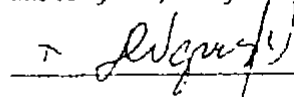
Address: 4250 SW 67TH AVENUE APT 48

MIAMI, FL 33155

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*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*

Required Signature/Registered Agent

05/24/2019

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.

Required Signature/Incorporator

05/24/2019

Date