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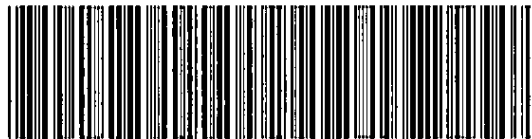
(Business Entity Name)

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DATE: 4/30/2021

NAME: GIVERNY, INC

TYPE OF FILING: ARTICLES

COST: 70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

COVER LETTER

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

SUBJECT: Giverny, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Rebecca Cirrinicione

Name (Printed or typed)

1744 N. Belcher Rod Suite 150

Address

Clearwater, FL 33763

City, State & Zip

727-415-7453

Daytime Telephone number

rcirrin@plglawyer.com

E-mail address: (to be used 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 corporation shall be: Giverny, Inc

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

4000 Fairport Lane, Cranberry Township, PA 16066

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: residential and commercial flooring

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Staesinic, Officer

Address 4000 Fairport Lane
Cranberry Township, PA 16066

Name and Title: Susan Staesinic, Officer

Address: 4000 Fairport Lane
Cranberry Township, PA 16066

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: James Staresinic
Address: 3185 Kernan Circle Apt 301
Jacksonville, FL

APR 30 PM 4:06

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Rebecca Cirrinicione
Address: 1744 N. Belcher Rod Suite 150
Clearwater, FL 33763

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

James Staresinic 4/29/2021
Required Signature/Registered Agent 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.

Rebecca Cirrinicione 4/29/2021
Required Signature/Incorporator Date