

P97000023930

TRANSMITTAL LETTER

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

800002108348--2
-03/10/97--01069--021
****122.50 ****122.50

SUBJECT: FOUR SEASONS INTERIORS, INC.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: FOUR SEASONS INTERIORS, INC.
Name (printed or typed)

3393 PEBBLE PLACE
Address

TEQUESTA, FLORIDA 33469
City, State & Zip

561/743-2613
Daytime Telephone number

FILED
97 MAR 10 AM 8:32
TALLAHASSEE, FLORIDA

3/10/97
FB

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FOUR SEASONS INTERIORS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3393 PEBBLE PLACE

TEQUESTA, FLORIDA 33469

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

TWO THOUSAND SHARES COMMON STOCK - NO PAR

2000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM K. BEIERS

3393 PEBBLE PLACE

TEQUESTA, FLORIDA 33469

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

FOUR SEASONS INTERIORS, INC.

3393 PEBBLE PLACE

TEQUESTA, FLORIDA 33469

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

13th day of JAN UARY, 1997

GARY A. CHESNUT, PRES.

Signature

WILLIAM K. BEIERS, VICE PRES.

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FOUR SEASONS INTERIORS, INC.

2. The name and address of the registered agent and office is:

WILLIAM K. BEIERS, V.P.

(Name)

3393 PEBBLE PLACE

(P.O. Box not acceptable)

TEQUESTA, FLORIDA

33469

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

William K. Beiers

(Signature)

William K. Beiers, V.P.

1-13-97

(Date)

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TALLAHASSEE, FLORIDA