

P9800029824
TRANSMITTAL LETTER

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 30 AM 7:31

SUBJECT: TOM JONES TILE, 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

ADDITIONAL COPY REQUIRED

FROM: THOMAS J. JONES
Name (Printed or typed)

6412 ODOM ROAD
Address

LAKELAND FL 33809
City, State & Zip

941 - 853-1961
Daytime Telephone number

400002471844--3
-03/30/98--01029--010
****122.50 ****122.50

WS 4/1

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: TOM JONES TILE, INC.

ARTICLE II PRINCIPAL OFFICE

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

6412 ODOM ROAD
LAKELAND FL 33809

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

THOMAS J. JONES
6412 ODOM ROAD
LAKELAND, FL 33809

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ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

THOMAS J. JONES

6412 ODOM ROAD

LAKELAND, FL. 33809

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

22 day of MARCH, 19 98.

(An additional article must be added if an effective date is requested.)

Thomas Jones
Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 TOM JONES TILE, INC.

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

THOMAS J. JONES
(NAME)

6412 ODOM ROAD
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

LAKELAND FL 33809
(CITY/STATE/ZIP)

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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.

Thomas Jones
(SIGNATURE)

MARCH 27th 1998
(DATE)