

TRANSMITTAL LETTER
P9800042466

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

100002517681--8
-05/08/98--01111--007
*****78.75 *****78.75

SUBJECT: Room Improvements Inc. 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: Joann Albright
Name (Printed or typed)

18459 Pines Blvd. #187
Address

Pembroke Pines, Fla. 33029
City, State & Zip

(954) 431-4630
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 MAY -8 PM 3:26

FILED

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

CB
2/1/98

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Room Improvements Inc.

ARTICLE II PRINCIPAL OFFICE

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

18459 Pines Blvd. Suite 187
Pembroke Pines, Fla. 33029

ARTICLE III SHARES

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

Seven Thousand Five Hundred (7,500) shares of common stock,
each share having the par value of ONE DOLLAR (1.00).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Joann Albright
18459 Pines Blvd. #187
Pembroke Pines, Fla. 33029

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Joann Albright
2031 NW 96 Ter. Apt. F
Pembroke Pines, Fla. 33024

Joann Albright
Signature/Incorporator

5-5-98
Date

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

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

Joann Albright
Signature/Registered Agent

5-5-98
Date

FILED
98 MAY - 8 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA