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

\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

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

gN7-23-98

	<b>五名 8</b>
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:  Universal  ARpet Are,	LNC.
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:	1
The principal place of business and mailing address of this corporation shall be:  2041 GRAND BIVO. HOLICAY	fl. 34691
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstanding at any	v one time in
100 SHARES	one time is.
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRES	86
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:	<u> 55</u>
PATRICIA CLIMMINS 2047 GRANN Blud HOLIDAY, F	0 3466
2847 GRANCE BIUN HOCKEY, T	1. 2469/
ARTICLE V INCORPORATOR	
The name and address of the incorporator to these Articles of Incorporation are:	
	41.
4747 BEFAST Dr. Wewfort	RICHEY, TLA
	3465°

(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

Mreva ammen

Signature/Registered Agent

Signature/Incorporator

Date