TRANSMITTAL LETTER

P980000 86345

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

SUBJECT:	ULTIMAX FLOOR COVERIN		<u> </u>
		orporate name - must include suffix) BDDDD2E -10/07/ ******7	557568——C /9801047011 /8.75 *****78.75
Enclosed is an o	/ -	S of incorporation and a check for: □\$122.50 □\$131.25 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRE	
FRO	FROM: Carol A. Perantie Name (Printed or typed) 5139 Trouble Creek Road Address New Port Richey, FL 34652 City, State & Zip		DIVISION OF CORP
	(813) 845-6111 Daytime To	elephone number	STAII I:0

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

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.

Business Corporation Act, hereby adopts the following Articles of Incorporation. ARTICLE I NAME

The name of the corporation shall be:

ULTIMAX FLOOR COVERINGS, INC.

ECRETARY OF STATEMENT OF CORPORATIONS

ARTICLE II PRINCIPAL OFFICE

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

14803 U.S. Hwy. 19 Hudson, FL 34667

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 7,500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robert R. Sears 14803 U.S. Hwy. 19 Hudson, FL 34667

ARTICLE V INCORPORATOR

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

Robert R. Sears 14803 U.S. Hwy. 19 Hudson, FL 34667

Signature/Incorporator

10-2-98

Date

ROBERT R. SEARS

(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 figure position as fegistered agent

Signature/Registered Agent

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Date

ROBERT R. SEARS