Department of Star Division of Corpor P. O. Box 6327 Tallahassee, FL 33	rations	1077/79
SUBJECT: Z	ENterior trim Co (Proposed corpo	on Nection FNC. Trate name - must include suffix)
		700029734970 -08/30/9901073009 *****78.75 ******78.75
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:		
☐ \$70.00 Filing Fee	\$78.75	\$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status
FROI	M: Charlotte W. Name (ADDITIONAL COPY REQUIRED S Printed or typed)
	•	Address (2), State & Zip
	(850) 42/- Daytime	Telephone number Telephone number Telephone number LAMASSEE FLORA TOTAL DE LAMASSEE FLORA T
	NOTE: Please provide the	original and one copy of the articles.
		<i>\ \ \ \ \ \ \ \ \ \</i>

T

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.

The name of the corporation shall be: Interior trin Connection, The.

ARTICLE II PRINCIPAL OFFICE

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

11768 Bright Star Circle
TAllahassee, Fl. 32311

ARTICLE III SHARES

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

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

Charlotte a. Reed

11768 Bright Star Cr.

Tallah Assee, Florida 32311

ARTICLE V INCORPORATOR

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

Charlotte a. Reed

TMOS Bright Star Cr.

TALL, Fl. 32311

Madatawa. Reed

Signature/Incorporator

Signature/Incorporator

(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

Signature/Registered Agent

30/99 Date