## TRANSMITTAL LETTER

# P99000096714

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

**400003030434--5** -11/01/99--01074--004 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Sapphire Kitchens & Baths, 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 of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL COP	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status Y REQUIRED	
FROM:	Terci young	inted or typed)	-	
1904 Matico Avenue PAR SECRETARIA Address				99 NOV -
	Dettora F City, S	L 32725 State & Zip	RY OF STA	
(0.0080  asou)				1

Daytime Telephone number

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

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#### **ARTICLES OF INCORPORATION**

### SAPPHIRE KITCHENS & BATHS, INC.

#### **ARTICLE 1**

The name of the corporation shall be:

SAPPHIRE KITCHENS & BATHS, INC.

#### **ARTICLE II**

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

1964 Matico Avenue Deltona, FL 32725

#### **ARTICLE III**

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

#### **ARTICLE IV**

The name and address of this Incorporator and Registered Agent to these Articles of Incorporation are: TERI YOUNG

1964 Matico Avenue Deltona, FL 32725

Signature of Incorporator

Date

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.

Registered Agent

Date