

P99000105163

Requester's Name

Address

City/State/Zip

Phone #

K. Greenland

1444 SW 14 PI

N. Telle PI 33068

Office Use Only

R(S), (if known):

Document #)

100003048661--6

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*****70.00 *****70.00

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
DEC -6 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. SMITH DEC 06 1999

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

November 22, 1999

K. GREENLAND
4000 N. ST. RD. 7, STE. 306
LAUDERDALE LAKES, FL 33319

SUBJECT: CARPET AND TILE WAREHOUSE INC
Ref. Number: W99000026762

We have received your document for CARPET AND TILE WAREHOUSE INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6927.

Tracy Smith
Document Specialist

Letter Number: 599A00055716

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Beacon Floor covering

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

4000 N. St. Rd. 7 Lauderdale Lakes 33319 Fl.
Suite 306

ARTICLE III SHARES

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

100 (100) ONE HUNDRED

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Kenrick Greenland
4000 N. St. Rd 7, suite 306
Lauderdale Lakes Fl 33319

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Kennick Greenland
4000 N. St. Rd 7 Suite 306
Lauderdale Lakes Fl. 33319
Pauline Greenland
4000 N. St. Rd. Suite 306
Fl. 33319

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

25th day of October, 19 99

K. G. - 11
Signature

Pauline Greenland
Signature

Signature

Articles of Incorporation
Filing Fee - ~~\$35~~ 70

**CERTIFICATE OF DESIGNATION OF
REGISTERD AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF
THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING
THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

Beacon
Floorcovering INC.

2. The name and address of the registered agent and office is:

Kenrick Greenland
4000 N. St. Rd. 7 suite 306
Lauderdale Lakes 33319 FL.
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designate 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 provision 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.

K. Q. 17
(Signature)

10/25/99
(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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