

P030000 60645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

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06/03/03--01051--025 \*\*78.75

RECEIVED  
03 JUN -3 AM 11:22  
DIVISION OF CORPORATION

FILED  
03 JUN -3 PM 2:40  
STATE  
TALLAHASSEE, FLORIDA

**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Learning Concepts of North Florida Inc.

- Art of Inc. File \_\_\_\_\_
- LTD Partnership File \_\_\_\_\_
- Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- Fictitious Name File \_\_\_\_\_
- Trade/Service Mark \_\_\_\_\_
- Merger File \_\_\_\_\_
- Art. of Amend. File \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name \_\_\_\_\_

6/3/03

Date

10:07

Time

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

03 JUN -3 PM 2:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Cleaning Concepts of North Florida Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

P.O. Box 1817  
Bellevue, FL 34421

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Commercial cleaning & related services

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

JAMES J. LYNN PRESIDENT  
P.O. Box 1817  
Bellevue, FL 34421

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

James J. Lynn  
2541 SW 87 Pl.  
Ocala, FL 34476

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JAMES J. LYNN  
P.O. Box 1817  
Bellevue, FL 34421

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*James J. Lynn*

Signature/Registered Agent

5/29/03

Date

*James J. Lynn*

Signature/Incorporator

5/29/03

Date