CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222

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Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE

1 1/2% per month on Past Due Amounts

THANK YOU

95 MAR 29 PH 2: 37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

# ARTICLES OF INCORPORATION

of

## MAIDS PLUS, INC.

## **EIRST:**

The name of the Corporation shall be MAIDS PLUS, INC. The principal mailing address of the corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

## SECOND:

The purposes for which the corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

### THIRD:

The corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

## **EOURTH:**

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

## EIFTH:

The registered agent for the corporation shall be:

STANLEY A. GOLDSMITH 1605 Main Street, Suite 1001 Sarasota, Florida 34236

## SIXTH:

To the incorporator of MAIDS PLUS, INC .:

I understand my obligations as your Registered Agent and hereby accept appointment as your Registered Agent in accordance with F.S. 48.091.

Stanley-A. Goldsmith

## SEVENTH:

The initial Board of Directors of the corporation shall consist of one (1) member:

Soraya Burns 3165 Claude Lane Sarasota, Florida 34234

## EIGHTH:

The incorporator of MAIDS PLUS, INC., who by his signature hereby acknowledges the adoption of these Articles of Incorporation, is:

STANLEY COLDSMITH 1605 Main Street Suite 1001 Sarasota, Florida 34236

STATE OF FLORIDA ) COUNTY OF SARASOTA ) \$5:

The foregoing Articles of Incorporation of Maids Plus, Inc., were acknowledged before me this day of March 1995 by STANLEY A. GOLDSMITH as registered agent and incorporator. He is personally known to me or has produced as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.

OFFICIAL NOTARY SEAL LISA D CUSTER NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC364755 MY COMMISSION EXP. APR. 14,1998 Signature of Notary Public

Print Name of Notary Public

I am a Notary Public of the State of FURIDA, and my commission expires on 41498.