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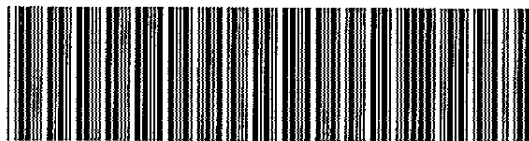
(Business Entity Name)

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TALLAHASSEE, FLORIDA

W05-55275
JAN 15 2006

J. BRYAN FEB - 1 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Carpet Saver, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mark Lee Smith, Esq.

(Name of Person)

Mark Lee Smith, P.A.

(Firm/Company)

224 E. Garden Street, Suite 3

(Address)

Pensacola, FL 32502

(City/State and Zip code)

For further information concerning this matter, please call:

Mark Lee Smith, Esq.

(Name of Person)

at (850) 469-1677

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2005

MARK LEE SMITH, ESQ.
MARK LEE SMITH, P.A.
224 E. GARDEN STREET, SUITE 3
PENSACOLA, FL 32502

SUBJECT: THE CARPETSAVER, INC.
Ref. Number: W05000055275

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We have received your document for THE CARPETSAVER, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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

Please return 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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 605A00072118

MARK LEE SMITH

Member
National Association
of Social Security Claimants' Representatives

January 26, 2006

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

Attention: Joey Bryan

Reference No: WO5000055275
The Carpet Saver, Inc.

Gentlemen:

We are resubmitting our application to have The Carpet Saver, Inc. registered as a foreign corporation. We have changed the name to Carpet Saver By Lewis, Inc. Attached is the application and a copy of your letter.

Very truly yours,

Mari Beth Abel
Mari Beth Abel, Paralegal
MARK LEE SMITH, INC.

Enclosures

**MARK
LEE
SMITH, P.A.**

**ATTORNEYS AND
COUNSELORS
AT LAW**

224 E. GARDEN STREET
SUITE THREE
PENSACOLA, FLORIDA 32501

TELEPHONE (850) 469-1677
FACSIMILE (850) 434-8417

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. The Carpet Saver, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
Carpet Saver By Lewis, Inc.

(If name unavailable in Florida, enter alternate name for the purpose of transacting business in Florida)

2. Arizona 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 18, 1989 5. _____
(Date of incorporation) (Duration: Year corp. will come to exist or "perpetual")

6. Oct 12, 2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. The Carpet Saver, Inc.
(Principal office address)
2918 S. Alma School Road, Mesa, AZ 85210-4034
(Current mailing address)

8. Catastrophic Hazard Flood Restoration
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Mark Lee Smith

Office Address: 224 E. Government St., Suite 3
Pensacola, Florida 32502
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative 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's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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A. DIRECTORSChairman: James D. LewisAddress: 502 E. Country Plaza S.
Gilbert, AZ 85234Vice Chairman: Kathrine LewisAddress: 502 E. Country Plaza S.
Gilbert, AZ 85234

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: James D. LewisAddress: 502 E. Country Plaza S.
Gilbert, AZ 85234

Vice President: _____

Address: _____

Secretary: - Treas. Kathrine LewisAddress: 502 E. Country Plaza S.Treasurer: Gilbert, AZ 85234

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. KATHRINE J. LEWIS, Treasurer

(Typed or printed name and capacity of person signing application)

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5. CAPITALIZATION: (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate. Please examine the corporation's original Articles of Incorporation for the amount of shares authorized. Review all corporation amendments to determine if the original number of shares has changed. Examine the corporation's minutes for the number of shares issued. PLEASE PRINT OR TYPE CLEARLY.

Number of Shares/Certificates Authorized	Class	Series Within Class (if any)
<u>10,000</u>	<u>Common</u>	
Number of Shares/Certificates Issued	Class	Series Within Class (if any)
<u>10,000</u>	<u>Common</u>	

6. SHAREHOLDERS: (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

List shareholders holding more than 20% of any class of shares issued by the corporation, or having more than a 20% beneficial interest in the corporation. PLEASE PRINT OR TYPE CLEARLY.

Name: James D. Lewis Name: Katharine J. Lewis
 NONE ☐ Name: _____ Name: _____

7. OFFICERS PLEASE PRINT OR TYPE CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: <u>JAMES D. LEWIS</u>	Name: <u>KATHARINE J. LEWIS</u>
Title: <u>PRESIDENT</u>	Title: <u>Sec / Treas</u>
Address: <u>502 E Country Plaza S</u>	Address: <u>502 E Country Plaza S</u>
<u>Gilbert, AZ 85234</u>	<u>Gilbert, AZ 85234</u>
Date taking office: <u>1-1-96</u>	Date taking office: <u>9-28-94</u>
Name: _____	Name: _____
Title: _____	Title: _____
Address: _____	Address: _____
Date taking office: _____	Date taking office: _____

8. DIRECTORS PLEASE PRINT OR TYPE CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: <u>JAMES D. LEWIS</u>	Name: <u>KATHARINE J. LEWIS</u>
Address: <u>Same</u>	Address: <u>Same</u>
Date taking office: <u>9-22-94</u>	Date taking office: <u>9-22-92</u>
Name: _____	Name: _____
Address: _____	Address: _____
Date taking office: _____	Date taking office: _____

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 FLORIDA

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Brian C. McNeil, Executive Director of the Arizona Corporation Commission, do hereby certify that

*****THE CARPETAVER, INC.*****

a domestic corporation organized under the laws of the State of Arizona, did incorporate on July 18, 1989.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said corporation is not administratively dissolved for failure to comply with the provisions of the Arizona Business Corporation Act; and that its most recent Annual Report, subject to the provisions of A.R.S. sections 10-122, 10-123, 10-125 & 10-1622, has been delivered to the Arizona Corporation Commission for filing; and that the said corporation has not filed Articles of Dissolution as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 30th Day of November, 2005, A. D.



EXECUTIVE SECRETARY

BY:

[Signature]
[Signature]

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