# ## TRANSMITTAL LETTER | 1000006561

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

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SUBJECT:	THE	FINAL	ToucH	OF A	LACHUA		75.0		_
SOBJECT.			(Proposed corp	orate name -	must include	suffix)	USAL ANASSEE, FL	FILED 8:30	
Enclosed is an o	original	and one(1) cop	oy of the artic	les of incor	poration and	a check for	: 97	30	
☐ \$70. Filing F	iee	■ \$78.75 Filing Fee & Certificate	of Status			Certit & Ce Statu	g Fee, fied Copy rtificate of s		
FROM: DAVID M. PALPANT & CHERYL M. BERNAKD  Name (Printed or typed)									n
17926 N.W. 149th PLACE Address									;
ALACHUA, FL 32615 City, State & Zip							<del></del>		ं स्कें ल्या
(904) 462-3470 Daytime Telephone number									

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

# ARTICLES OF INCORPORATION

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

OO JAN 12 AM 8:31
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

THE FINAL TOUCH OF ALACHUA, INC.

# ARTICLE II PRINCIPAL OFFICE

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

17926 N.W. 149th PLACE ALACHUA, FL 32615

### ARTICLE III SHARES

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

1000

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

CHERYL M. BERNARD . 13607 N.W. 135 th BRIVE ALACHUA, FL 32615

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

DAVID M. PALPANT 17926 N.W. 149th PLACE ALACHUA, FL 32615

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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

Chery Cm. Burnard
Signature/Registered Agent

Jan. 12, 2000 Date