

# P00000011808

## TRANSMITTAL LETTER

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

300003116903-7  
-01/31/00-01137-002  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

**PERSONAL TOUCH SERVICE II INC**  
**SUBJECT:** \_\_\_\_\_

Enclosed are an original and one (1) copy of the articles of incorporation and check for:

☐ \$70.00

☒ \$78.75  
Filing Fee &  
Certified Copy

☐ \$122.50

Filing Fee  
& Certified Copy

☐ \$131.25

Filing Fee,  
Certified Copy,  
& Certificate

**Additional Copy Required**

**SHARON J LEHMAN**  
**FROM:** \_\_\_\_\_  
Name (printed or typed)

**4127 WIMBLEDON DRIVE**

\_\_\_\_\_  
Address

**COOPER CITY , FL 33026**

\_\_\_\_\_  
City, State, & Zip

**(954) 437-7759**

\_\_\_\_\_  
Daytime Telephone Number

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

T. Burch FEB 3 2000

RECEIVED  
TALLAHASSEE, FLORIDA

00 JAN 31 AM 8:48

FILED

## 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:

**PERSONAL TOUCH SERVICES II INC**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

**4127 WIMBLEDON DRIVE  
COOPER CITY , FL 33026**

### ARTICLE III SHARES

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

**200 SHARES AT \$1.00 PAR VALUE**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**SHARON J LEHMAN  
4127 WIMBLEDON DRIVE  
COOPER CITY FL 33026**

**ARTICLE V INCORPORATOR(S)**

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

**SHARON J LEHMAN  
4127 WIMBLEDON DR  
COOPER CITY, FL 33026**

**JIM J VALDES  
6320 NW 37<sup>TH</sup> TERRACE  
MIAMI SPRINGS FL 33166**

**ARTICLE VI**

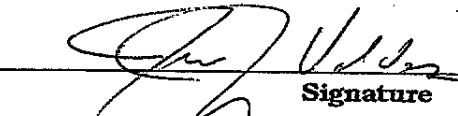
**PRESIDENT JIM J VALDES  
6320 NW 37<sup>TH</sup> TERR  
MIAMI SPRINGS FL 33166**

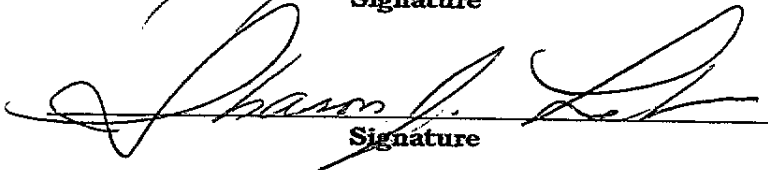
**VICE PRESIDENT SHARON J LEHMAN  
4127 WIMBLEDON DRIVE  
COOPER CITY FL 33026**

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

**26<sup>ND</sup> JANUARY**  
\_\_\_\_\_ day of \_\_\_\_\_, 2000

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

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

The name of the corporation is: **PERSONAL TOUCH SERVICES II INC**

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

**SHARON J LEHMAN**

(NAME)

**4127 WIMBLEDON DRIVE**

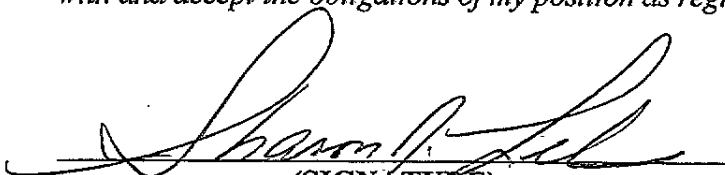
(P.O. BOX OR MAIL DROP BOX NOT ACCEPTABLE)

**COOPER CITY , FL 33026**

(CITY/STATE/ZIP)

FILED  
00 JAN 31 AM 8:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

  
(SIGNATURE)

**01/26/2000**

(DATE)

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