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TRANSMITTAL LETTER

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

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*****78.75 *****78.75

SUBJECT: Lodge-ical Laundry Solutions, Inc.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Lodge-ical Laundry Solutions, Inc.
Name (Printed or typed)

1304 SW 160th Ave., PMB 435
Address

Sunrise, FL 33326

City, State & Zip

(954) 680-6806

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.

ARTICLE I NAME

The name of the corporation shall be:

Lodge-ical Laundry Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1304 SW 160th Ave., PMB 435
Sunrise, FL 33326

ARTICLE III SHARES

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

1,000 share of common stock @ 1.00 per share par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Scott Lodge
15640 Lancelot Court
Sunrise, FL 33326

ARTICLE V INCORPORATOR

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

Scott Lodge
15640 Lancelot Court
Sunrise, FL 33326

✓ Signature/Incorporator

✓ 3/28/2000
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

✓ Signature/Registered Agent

✓ 3/28/2000
Date