Department of State O

P. O. Box 27
Tallahassee, FL 32314

SUBJECT:)	irt Busters (Proposed corn	porate name - must include suff	CLEUNING CO. IN	
			50 1. 70.00000000000000000000000000000000	00003240205- -05/05/000101901 ******87.50 ******87	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :					
☐ \$70.0 Filing Fe		\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FRe	OM:	BRENda B. Do	ADDITIONAL COI	PY REQUIRED	
Name (Printed or typed)					
P.O. Box 38122 Address Address Address					
		Tallahassee City,	Llozida 323 State & Zip	ARIMENT OF STA	
	((850) 422-3516	(H) (850) 906 -		

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

O MAY -4 PM 1: 10 CCRETARY OF STATE LAHASSEE, FLORIDA

Will Wait

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.

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his canacity. I further

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D PN 1: 10 F STATE FLORIDA
FILE! MAY -4 P RETARY OF ANIASSEE,
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