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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

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-09/25/00--01130--019
*****78.75 *****78.75

SUBJECT: WOLEVERNESS AUTO DETAIL 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 of Status

☒ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: JANET M. WOLEVER
Name (Printed or typed)

5270 N. ORANGE BLOSSOM TRAIL #105
Address

ORLANDO FL. 32810
City, State & Zip

407-8223865
Daytime Telephone number

D. BROWN SEP 28 2000

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:

WOLEVERNESS AUTO DETAIL INC.

ARTICLE II PRINCIPAL OFFICE

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

BRITTANY AT ROSEMONT
5270 N. ORANGE BLOSSOM TRAIL #105
ORLANDO FL. 32810

ARTICLE III SHARES

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

ONE THOUSAND FIVE HUNDRED (1500)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JANET M. WOLEVER
7432 WOODHILL PKWY #1517
ORLANDO 32818

ARTICLE V INCORPORATOR

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

JANET M. WOLEVER
7432 WOODHILL PKWY #1517
ORLANDO FL. 32818



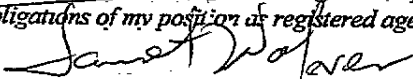
Signature/Incorporator

09-19-00

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

09-19-00

Date