Division of Corporations

Page 1 of 2

0000010547

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audi number (shown below) on the top and bottom of all pages of the document.

(((H00000059210 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : SOLUTIONS BUSINESS SERVICES, INC.

Account Number : I20000000136 : (352)483-5351 Phone

Fax Number : (352) 483-1458

FLORIDA PROFIT CORPORATION OR P.A.

Murphey's Pressure Washing, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

F. CHESSEA

NOV 1 3 2000

FROM: WRIGHT PLACE/SOLUTIONS, INC. FAX NO.: 352-483-1458 Nov. 10	2000 11:03AM P2
ARTICLES OF INCORPORATION FAX AUDIT ## In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	0000 59210 5
ARTICLE I NAME The name of the corporation shall be: MURPHEY'S PRESSURE WASHING, INC.	DO NOV -9 AM IO: 09 SECHETARY OF STATE TALLARIASSEE, FLORID
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4345 N. HWY. 19-A MOUNT DORA, FL. 32757 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	AH 10: 09 SEE, FLORIDA
TO PROVIDE PRESSURE WASHING FOR COMMERCIAL AND RESIDENTIAL ARTICLE IV SHARES The number of shares of stock is: 100 SHARES OF STOCK AUTHORIZE	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): JOHN F. MURPHEY DEBORAH D. MURPHEY AT MOUNT DO	WY. 19-A RA, FL 32757
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: DURNE A. HINZ 4345 N. HWY, 19-A MOUNT DORA, FL 32757 ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
SOLUTIONS BUSINESS SERVICES, INC. 4345 N. HWY. 19-A MOUNT DORA FL 32757 ***********************************	*************
Having been named as registered agent to accept service of process for the above stated corporation at a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap when I is a supposed to the appointment as registered agent and agree to act in this cap when I is a supposed to the appointment as registered agent and agree to act in this cap when I is a supposed to the appointment as registered agent and agree to act in this cap when I is a supposed to the above stated corporation at the above stated corporation at the appointment as registered agent and agree to act in this cap when I is a supposed to the above stated corporation at the above stated corporation at the appointment as registered agent and agree to act in this cap when I is a supposed to accept the appointment as registered agent and agree to act in this cap when I is a supposed to accept the appointment as registered agent and agree to act in this cap when I is a supposed to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment agent age	the place designated in this
Signature/Registered Agent DUANE A, HINZ Date Date Date Date Date	10-00
FAX AUDIT # (((H000000 59210 5)))