

925 Sunshine Lane, Suite 1040 Altamonte Springs, FL 32714 Office Use Only

**Examiner's Initials** 

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	
(Corporation Name) 2.	(Document #)  1000031130916  -01/27/0001080009  ****122.50 *****78.75
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	☐ Photocopy ☐ Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other BRATT CHAPMAN GAVE	<ul> <li>□ Amendment</li> <li>□ Resignation of R.A., Officer/Director</li> <li>□ Change of Registered Agent</li> <li>□ Dissolution/Withdrawal</li> <li>□ Merger</li> </ul> REGISTRATION/QUALIFICATION
AUTHORIZATION BY PHONE TO	REGISTRATION/QUALIFICATION
CORRECT ART II S V  DATE D 22  BOC. EXAM VP	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
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CR2E031(7/97)



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 1, 2000

MASTERS DRIMIST 925 SUNSHINE LN., STE. 1040 ALTAMONTE SPRINGS, FL 32714

SUBJECT: PROFESSIONAL CARPET AND UPHOLSTERY RESTORATION

INC.

Jan Landin La

Ref. Number: W0000002878

We have received your document for PROFESSIONAL CARPET AND UPHOLSTERY RESTORATION INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Shannon Thompson Document Specialist

Letter Number: 200A00004855

# 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.

> ARTICLEI NAME

The name of the corporation shall be:

Professional Carpet And Upholstery Restoration Inc.

PRINCIPAL OFFICE ARTICLEII

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

499 N. SR 434 # 2029 Altamont Springs, Fl

SHARES ARTICLE III

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

100 Shares Common Stock

INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Donald Chapman 4744 So Ocean Blvd #2 Highland Beach Fl. 33487

### ARTICLE V INCORPORATOR(S)

# See instructions for officers/directors

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

DONALD CHAPMAN	 	-	 	
404 Summit Ridge Place #314				
Longwood F1. 32779 (Seminole County)				

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

24 day of January 2000.

Signature

Signature

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.

Į.,	The name of the corporation is: Professional Carpet	_
	And Upholstery Restoration Inc.	
2.	The name and address of the registered agent and office is:	
	Donald Chapman 4744 So. Ocean Blvd #2 Highland Beach, Fl. 33487 (NAME)  (NAME)	
	4744 So Ocean Blvd. #2  (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
	Highland Beach, Fl. 33487	

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)