# PO1000033986

#### TRANSMITTAL LETTER

Department of State
<b>Division of Corporations</b>
P. O. Box 6327
Tallahassee, FL 32314

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SUBJECT: Clean Brite Pool & Spa Cleaning, Inc.
(Proposed corporate name - must include suffix

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

**४ \$70.00** 

\$78.75

Filing Fee Filing Fee

& Certificate of Status

**\$78.75** 

\$87.50

Filing Fee

& Certified Copy

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Lee Leavenworth

Name (Printed or typed)

<u>2125 Tea Street</u>

Address

Port Charlotte, FL 33948

City, State & Zip

(941)625-9451

Daytime Telephone number

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

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## 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:

Clean Brite Pool & Spa Cleaning, Inc.

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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

2125 Tea Street Port Charlotte, FL 33948

<u>ARTICLE III SHARES</u>

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

50,000 Shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

33948

Lee Leavenworth 2125 Tea Street

Port Charlotte; FL 33948

# ARTICLE V INCORPORATOR

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

Lee Leavenworth 2125 Tea Street Port Charlotte, FL

70 /000

Signature/Incorporator

03/28/01

(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 appaintment 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 fegistered agent

Signature/Registered Agent

Date