POLOCOS TRANSMITTAL LETTER STATEMENT AND ADDRESS OF THE POLOCOS AND ADDRESS

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

SUBJECT: DERVICES NC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	582 582 582 583 580 6°1	2732472 0101087020 0.00 *****70.00	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: STEVE KATZMANI Name (Printed or typed)					
798 BELTED KINGFISHEN DR. X.					
Pain Hangor FL. 34683 City, State & Zip					
s sul	727-77/-7 Daytime Te	1500 lephone number		Company Compan	
1001-19091			E CRIC	5	

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

Lalula



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

2001 JUN 1 1 PM 12: 57

DEUT TALLAHASSFE FLORIDA

May 29, 2001

STEVE KATZMAN 798 BELTED KINGFISHER DRIVE N PALM HARBOR, FL 34683

SUBJECT: PERFECT SERVICES, INC. Ref. Number: W01000012091

We have received your document for PERFECT SERVICES, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 487-6973.

Claretha Golden Document Specialist New Filings Section

Letter Number: 101A00032563

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	- I
	2001 JUN 1 1 PA 12: 57
PERFECT SERVICE INDUSTRIES ARTICLE II PRINCIPAL OFFICE	A LANGE STORY
APTICIE II PRINCIPLY OF THE PROPERTY OF THE	TALLAHA-SEE ELONDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	TORIUA
790 Back of business/maning address is:	
798 BELIED KING FISHER DR. Paim HARBOR, FL. 34683	
7 HENT HARBOR, F.L. 34683	1
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ANY LEGAL BUSINESS	1
ARTICLE IV SHARES	
The number of shares of stock is:	
1,000,000	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional)	
The name(s) and address(es):	4.3
、 ,	
•	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
ZATE KATZMAN	
798 BELTED KINGFISHER DR. N.	
PALM HARBOR, FL. 34683	'
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
STEVE KATZMAN	
798 BELTED KING FISHER DR. PALM HARBOR, FL 34683	
PAUI NAKDOK, PL 39083	
**************************************	**********
Having been named as registered agent to accept service of process for the above stated cor- certificate, I am familiar with and accept the appointment as registered agent and agree to a	poration at the place designated in this
As a second with	e as mas cupacity
Simple Miller	5/18/01
Signature/Registered Agent	Date
Charles of	
	./ /

Signature/Incorporator