

TRANSMITTAL LETTER

P020000036497

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

600005176796--4  
-03/29/02--01042--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Dyna-Maids, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Allen Brackett  
Name (Printed or typed)  
6260 N. Dixie Highway  
Address  
Boca Raton, FL 33487  
City, State & Zip  
1-561-597-4901  
Daytime Telephone number

FILED  
02 MAR 29 AM 9:13  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

04-04-02

## 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:

Dyna-Maids, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6260 N. Dixie Highway  
Boca Raton, FL 33487

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Cleaning service.

### ARTICLE IV SHARES

The number of shares of stock is:

1,000, no par common

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Allen Brackett, Officer  
6260 N. Dixie Highway  
Boca Raton, FL 33487

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Allen Brackett  
6260 N. Dixie Highway  
Boca Raton, FL 33487

### ARTICLE VII INCORPORATOR

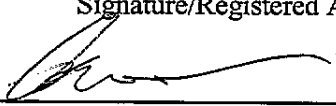
The name and address of the Incorporator is:

Allen Brackett  
6260 N. Dixie Highway  
Boca Raton, FL 33487

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

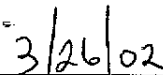
  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Signature/Incorporator

02 MAR 29 AM 9:13  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date