

P03000027809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

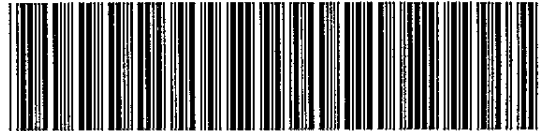
(Business Entity Name)

(Document Number)

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2003 MAR 10 PM 3:25  
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03-10-03  
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## TRANSMITTAL LETTER

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

SUBJECT: Perfect Touch Mobile Fleet Wash Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Norman Carter  
Name (Printed or typed)

Po Box 220795  
Address

Hollywood FL 33022  
City, State & Zip

954 732-4286  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Ken Detzner  
Secretary of State

February 21, 2003

NORMAN CARTER  
PO BOX 220795  
HOLLYWOOD, FL 33022

SUBJECT: PERFECT TOUCH MOBILE FLEET WASH  
Ref. Number: W03000005198

We have received your document for PERFECT TOUCH MOBILE FLEET WASH and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You must list the corporation's principal office and/or a mailing address in the document.

You must list at least one incorporator with a complete business street address.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6928.

Tim Burch  
Document Specialist  
New Filing Section

Letter Number: 303A00011

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03 MAR 10 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

Perfect Touch mobile fleet wash Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Hollywood FL, 33020 PO Box 220795

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage unlawful activity in the  
State of Florida

### ARTICLE IV SHARES

The number of shares of stock is:

100

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

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

Norman Carter / President  
3600 N 56 ave Hollywood FL, 33021

### ARTICLE VI REGISTERED AGENT

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

3600 N 56 ave Hollywood FL, 33021  
APT 115

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Norman Carter 3600 N 56 ave Hollywood FL 33021

\*\*\*\*\*

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

Norman Carter

Signature/Registered Agent

2/17/03

Date

Norman Carter

Signature/Incorporator

2/17/03

Date

FILED  
2003 MAR 10 PM 3:25  
HALL COUNTY CLERK  
JANICE A. JONES