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Office Use Only

TRANSMITTAL LETTER

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

SUBJI	ect: <u></u>		hine by A TENAME-MUSTINCLU	Viriam Morris			
Enclos	ed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:			
1	\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status			
	FROM: Miriam Morris Name (Printed or typed)						
	5614 Rafeigh ST						
	HOLLYWOOD FL - 33021 City, State & Zip						
		954-964	3623				

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

Daytime Telephone number

	Os Car
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	3 January Control
ARTICLE I NAME The name of the corporation shall be: Sweep-N-Shine by Miriam N	Morris Incorporated
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5614 Raleigh ST HOLLYWOOD FL. 33021	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: The clean offices and residencial	homes for a prof
ARTICLE IV SHARES The number of shares of stock is:	t.
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Miriam Morris 5614 Raleigh ST HOLLYWOOD FL. 33021	· · · · · · · · · · · · · · · · · · ·
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Miriam Morris	•
5614 Raleigh ST. HOLLY WOOD FL. 33021 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Wiriam Morris 5614 Raleigh ST HOLLY WOOD FL. 33021	************
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree	
Signature/Registered Agent	07/8/03 Date
Signature Hager States	07/8/03
Signature/Incorporator	Date '