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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

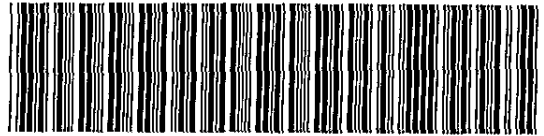
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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## TRANSMITTAL LETTER

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

**SUBJECT:** Facility Maintenance Systems, 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:** Dottie Rappaport

Name (Printed or typed)

12500 Classic Drive

Address

Coral Springs, Florida 33071

City, State & Zip

954-755-1141

Daytime Telephone number

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

**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:

Facility Maintenance Systems, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

12500 Classic Drive, Coral Springs, Florida 33071

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide building maintenance service and repairs

**ARTICLE IV SHARES**

The number of shares of stock is:

One Hundred (100) Shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Dottie Rappaport, 12500 Classic Drive, Coral Springs, Florida 33071; sole director and President

**ARTICLE VI REGISTERED AGENT**

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

Dottie Rappaport, 12500 Classic Drive, Coral Springs, Florida 33071

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Dottie Rappaport, 12500 Classic Drive, Coral Springs, Florida 33071

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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*

Dottie Rappaport

Signature/Registered Agent

8/29/03

Date

Dottie Rappaport

Signature/Incorporator

8/29/03

Date

FILED

03 SEP -2 AM 11:30

SECRETARY OF STATE  
TALLAHASSEE FLORIDA