P0400023342

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600027673786

01/28/04--01036--002 **70.00



(On) 2-5.04

TRANSMITTAL LETTER

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

SUBJECT: Larry	/ Collins Pressure Cleaning	& Painting Inc	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	la check for:
☑ \$70.00	_		
Filing Fee	☐ \$78.75 Filing Fee	\$78.75	□ \$87.50
rang ree	& Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	& Confidence of Status	& Certified Copy	& Certificate of
			Status
		ADDITIONAL CO	
EDOM: L	arry Collins		
PROM.	Name	(Printed or typed)	
	16041 Pickett Lane		
		Address	
	Hudson, FL 34667		
	City	, State & Zip	
	727-862-3995		
	Daytime	Telephone number	

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



The undersigned, acting as incorporator of a corporation pursuant to Chapter 607 and/or Chapter 621 F.S. (Profit)

ARTICLE ONE

The name of the corporation shall be: Larry Collins Pressure Cleaning & Painting, Inc.

ARTICLE TWO

The principal place of business and the mailing address of this corporation shall be: 16041 Pickett Lane, Hudson, FL 34 \$ 667

ARTICLE THREE

The specific purpose for which the corporation is organized is to perform any lawful business in the state of Florida

ARTICLE FOUR

The number of shares of stock is: Ten thousand (10000) per value \$.01.

ARTICLE FIVE

Initial Officers and Directors: President: Larry Collins Vice President: Mary Collins

ARTICLE SIX

The name and address of the Registered Agent is: Mary Collins, 16041 Pickett Lane, Hudson, FL 34667

ARTICLE SEVEN

The name and address of the Incorporator is: Larry Collins, 16041 Pickett Lane, Hudson, FL 34667

04 JAN 28 AM 11:58

SECRETARY OF STATE FALL AHASSEF FLORIDA

Having been named as registered agent to accept service of process for the above 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

1-26-04 Date 1-26-04 Date