P040000 31652

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



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SECRETARY OF STATE OF SECRETARY OF STATE OF COMPORATION

KON Jay

TRANSMITTAL LETTER

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

| (THOSE SOME STATE | | | | |
|---|-------------------------------------|---------------------------|--------------------|--|
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| | | , A secular dat gla | | |
| | | | | |
| Enclosed are an ori | ginal and one (1) copy of the artic | cles of incorporation and | a check for: | |
| □ \$70.00 | \$78.75 | □ \$78.7 <i>5</i> | □ \$87.50 | |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, | |
| | & Certificate of Status | & Certified Copy | Certified Copy | |
| | | | & Certificate of | |
| | | ADDITIONAL CO | Status PV REQUIRED | |
| ADDITIONAL COPY REQUIRED | | | | |
| FROM: | Wayne Roy | Parton | | |
| Mame (Printed or typed) | | | | |
| 4007 315t 11 | | | | |
| 406/3110 | | | | |
| Address | | | | |
| -600 | | | | |
| St Peterburg Florida 133714 | | | | |
| Schy, State & Zip | | | | |
| 212 111-3610 | | | | |
| Dayling Telephone number | | | | |

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

| In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | |
|---|----------------------|
| ARTICLE I NAME The name of the corporation shall be: | |
| WRP Finishing FNC | |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | |
| 4067 315 1 St Cetysping 38201 | <i>h</i> |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: 3/57. N. Saint Per | 2KS buly F1_33781 |
| Pressure washing | |
| ARTICLE IV SHARES The number of shares of stock is: | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): | DIVIS 04 |
| Tan Allew | FEB |
| 871 12th Aver. | FIL TARY OF CO |
| Saint Peterstung F1 33701 | AM IO: |
| ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: | H LA I |
| Wayne Ray Parton | Service Control |
| 4067 3151 Saint Patersburg F/ 337 | 7/3 |
| ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the <u>Incorporator</u> is: | |
| 4067 31st N. Sairt Petersburg F1 3 | 22712 |
| ************************** | ****** |
| Having been named as registered agent to accept service of process for the above stated corporation at the place certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity | e designated in this |
| Werelto 1/22 | 104 |
| Signature/Registered Agent Date | |
| | / -1 |

ARTICLES OF INCORPORATION