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2004 MAY 28 P 4:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~6-11-04~~  
~~6-11-04~~  
~~2004~~

6-1-04  
100

## TRANSMITTAL LETTER

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

SUBJECT: ALPHA & OMEGA JANITORIAL & PAINTING SERVICES, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: MC KENZIE C. BROCKINGTON

Name (Printed or typed)

7622 COVEDALE DRIVE

Address

ORLANDO, FL 32810

City, State & Zip

(407) 628-3229

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 20, 2004

MCKENZIE C. BROCKINGTON  
7622 COVERDALE DRIVE  
ORLANDO, FL 32810

SUBJECT: ALPHA & OMEGA JANITORIAL SERVICES, INC.  
Ref. Number: W04000016960

RECEIVED

04 MAY 28 PM 1:08

*and Painting*

*\* Please  
make name  
on cover.*

*Painting*

We have received your document for ALPHA & OMEGA JANITORIAL SERVICES, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

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) 245-6973.

Claretha Golden  
Document Specialist  
New Filings Section

Letter Number: 504A00035374

## TRANSMITTAL LETTER

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Division of Corporations  
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& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: MCKENZIE C. BROCKINGTON, JR.

Name (Printed or typed)

7622 COVEDALE DRIVE

Address

ORLANDO, FLORIDA 32818

City, State & Zip

407-948-2316

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)

FILED

## ARTICLE I NAME

The name of the corporation shall be:

ALPHA & OMEGA JANITORIAL & PAINTING SERVICES, INC.

2004 MAY 28 P 4: 42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7622 COVEDALE DRIVE, ORLANDO, FLORIDA 32818

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE COMMERCIAL CLEANING AND INTERIOR/EXTERIOR RESIDENTIAL & COMMERCIAL  
PAINTING SERVICES

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MCKENZIE C. BROCKINGTON, JR - 7622 COVEDALE DRIVE, ORLANDO, FLORIDA 32818 -PRESIDENT

JASCINTH L. BROCKINGTON - 7622 COVEDALE DRIVE, ORLANDO, FLORIDA 32818 -VICE PRESIDENT

AUDREY A. FOSTER-LEWIS - 6225 CANVASBACK LANE, ORLANDO, FLORIDA 32810 - VICE PRESIDENT

## ARTICLE VI REGISTERED AGENT

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

JASCINTH BROCKINGTON  
7622 COVEDALE DRIVE  
ORLANDO, FLORIDA 32818

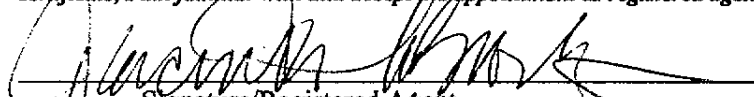
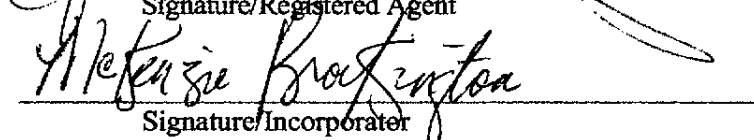
## ARTICLE VII INCORPORATOR

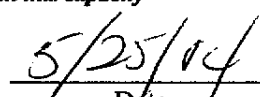
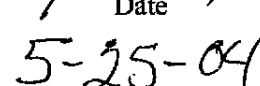
The name and address of the Incorporator is:

MCKENZIE BROCKINGTON, JR.  
7622 COVEDALE DRIVE, ORLANDO, FLORIDA 32818

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date