Dy000148534

(Pa	questor's Name)					
,	questoi s Maine)					
	ldress)					
. (Аи	uiess)					
	· · · · · · ·					
(Ad	ldress)					
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nar	ne)				
(Do	cument Number)					
Certified Copies	Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:					
	J					

Office Use Only



400041517224

[1072777(四十日日日日日的一十日日日 **175 (印)

SECRETARY AND THE SECRETARY

OD who

TRANSMITTAL LETTER

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

SUBJECT:	LKICAN KOOTER P	LUMBING & DEALN	CLEANING INC,				
	(FROPOSED CORPORA	TE NAME – <u>MOST INCL</u>	UDE SUFFIX)				
Emalacad are an aria	ingland and (1) come of the ow	ialas afinaamanntian and	la abauli fam				
Enclosed are all ong	final and one (1) copy of the arti	icles of incorporation and	a cneck for:				
\$70.00	Y \$78.75	□ \$78.75	1 987.50				
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of				
		ADDITIONAL CO	Status PPY REQUIRED				
FROM:	JOHN BURLE Name	(Printed or typed)					
3823 TAMIAMI TIZAIL							
	NAPLES FL City,	33962.					
City, State & Zip							
		944					
Daytime Telephone number							

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

ARTICLE I NAME					PH 3:47
The name of the corporation shall be: Ama	ZICAN	ROOTER	PLUMO	31NG & DR	PIN CKMING INC
ARTICLE II PRINCIPAL OFFICE					
The principal place of business/mailing address					
5703 R					
WILLIAM	SPRING	S FLORID	A 32	708	
ARTICLE III PURPOSE					
The purpose for which the corporation is orga	ınized is:	PROFIT			
ARTICLE IV SHARES The number of shares of stock is: 60,000	`				
The manner of summer of success as	,				
ARTICLE V INITIAL OFFICERS A List name(s), address(es) and specific title(s):	CHOL:	BURLE	≥∤	3823 TN	MIFFINI TOZ.
	PATE	ICIA BU	RLE-/	Naples	FLORIDA 33962
ARTICLE VI REGISTERED AGE The name and Florida street address (P.O. B	OX NOT ac JOHN E 3823 +		772	-	
ARTICLE VII _INCORPORATOR			234(02.	
The name and address of the Incorporator is:	JOHNI	BURGE			
	3823	Lancing			
	NAPLE	tamiamies FL 3	. IKAL 53010	L	
Having been named as registered agent to accept servicertificate. I am jumiliar with and accept the appointme	ice of process		tated corpo	oration at the pla	************ ce designated in this
- The Whulh				10-1-04	
Signature/Registered Agent				Date	
Signatura/Incorporator				10-1-04	<u> </u>
Signature/Incomprator				Date	

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)