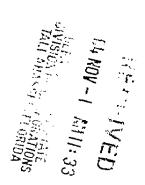
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Office Use Only



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## TRANSMITTAL LETTER

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

SUBJECT:	GENERAL MAIN	tencie INC	• •
	(PROPOSED CORPORA)		JDE SUFFIX)  I a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	CALVIN Mobl. Name  1314 Coilob  TALLALASSEE City,	DR_ Address	303
	\$50 519- Daytime T	7024 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:  MAIN TENCE  The name of the corporation shall be:	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
1314 Gibbs DR. TAll, Fl. 32303	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	_
LAWN, CONSTANTING CLEANING, PRESSURE CLEANING ECT	
ARTICLE IV SHARES	
The number of shares of stock is: \O.O.O	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  CALVINI Mobile  13'4 Gibbs DL.  ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  CALVINI Mobile  13'14 Gibbs DR.	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
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