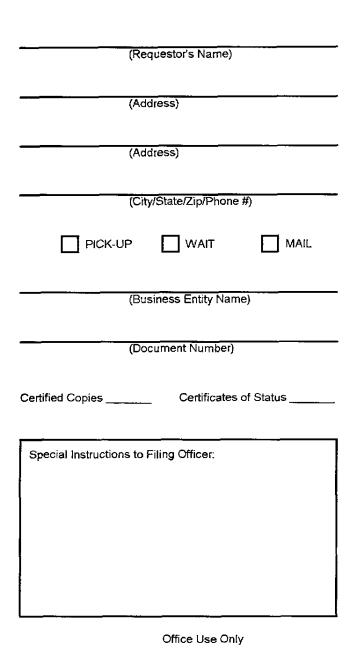
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# TRANSMITTAL LETTER

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

SUBJECT: Crime a	and Trauma Scene Cleaners, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Ric	hard L. Osburn		
	P.O. Box 322	(Printed or typed)	
	Williston, Florida 32696	Address , State & Zip	
<u>-</u>	(352) 528-2003	Celephone 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:

Crime and Trauma Scene Cleaners T.M.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 225 SE 1st Ave., Post Office Box 322, Williston, Florida 32696

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Cleaning of crime and death scenes

# 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):

Richard L. Osburn 225 SE 1st Ave. Williston, Florida 32696

# ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Richard L. Osburn 225 SE 1st Ave. Williston, Florida 32696

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Richard L. Osburn 225 SE 1st Ave. Williston, Florida 32696

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