

PO5000047391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

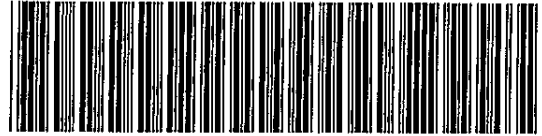
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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03/24/05 -011735-1025 *\$87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAR 24 PM 2:24

FILED

3/30/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: FranchiseWorks, 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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Christopher M Whatton

Name (Printed or typed)

593 Doe Cove Pl

Address

Apopka, FL 32703

City, State & Zip

407-928-2265

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

05 MAR 24 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FranchiseWorks, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

593 Doe Cove Place
Apopka, FL 32703

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate a Molly Maid house cleaning franchise.

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Christopher M Whatton
593 Doe Cove Pl
Apopka, FL 32703
President, CFO, Secretary

Rodney A Hampton
997 Saddleback Ridge Rd
Apopka, Fl 32703
Vice President

ARTICLE VI REGISTERED AGENT

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

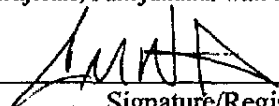
Christopher M Whatton
593 Doe Cove Pl
Apopka, FL 32703

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

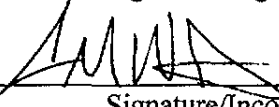
Christopher M Whatton
593 Doe Cove Pl
Apopka, FL 32703

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

3/21/05
Date



Signature/Incorporator

3/21/05
Date