

POS000067662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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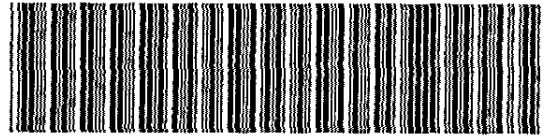
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/25/05--01031--011 \*\*87.50

FILED  
SECRETARY OF STATE  
DIVISION OF REGISTRATION  
05 MAY -9 AM 8:45

W05-2/404

## TRANSMITTAL LETTER

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

SUBJECT: Kleen-Rite Restoration INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

**ADDITIONAL COPY REQUIRED**

FROM: Howard Schweitzer  
Name (Printed or typed)

5401 NW 61 Place  
Address

Tamara, FL 33319  
City, State & Zip

1-954-214-4559  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 28, 2005

HOWARD SCHWEITZER  
5401 NW 61ST PLACE  
TAMARAC, FL 33319

SUBJECT: KLEEN-RITE RESTORATION INC.  
Ref. Number: W05000021404

We have received your document for KLEEN-RITE RESTORATION INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Complete the articles for a profit corporation and sign in the proper places. I'm returning the non-profit articles you don't need to fill those out. If you need any help feel free to give me a call.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6972.

Doris Brown  
Document Specialist  
New Filings Section

Letter Number: 205A00029589

RECEIVED  
05 MAY -9 AM 10:50

# ARTICLES OF INCORPORATION

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAY -9 AM 8:45

## ARTICLE I NAME

The name of the corporation shall be: Kleen-Rite Restoration Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5401 NW 61 place  
Tamarac, Fl. 33319

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

## ARTICLE IV SHARES

The number of shares of stock is: ONE

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Howard Schweitzer  
5401 NW 61 place  
Tamarac, Fl. 33319  
V.P.

## ARTICLE VI REGISTERED AGENT

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

Howard Schweitzer  
5401 NW 61 place  
Tamarac, Fl. 33319

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Howard Schweitzer  
5401 NW 61 place  
Tamarac, FL 33319

\*\*\*\*\*

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

Date

5/4/05

Signature/Incorporator

Date

5/4/05