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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	NAIL
(Business Entity Name)	
(Document Number)	
(Document Number)	
Certificates of Status	<u></u>
Special Instructions to Filing Officer:	
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SECRETARY OF STATE

SECRETARY OF STATE

2.67

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

_	
Re:	Florida Water Restoration & Mold Control, Inc.
Gentlemen:	
Enclosed please fir check in the amount	nd the original and one copy of the Articles of Incorporation, together with my at of \$70.00.
This represents the above named corporate	e cost of the Filing Fees and Fee for Registered Agent Designation for the oration.
	Very truly yours.
	KATSURA NOMATSU (Individual's Name)
	Florida Water Restoration & Mold Control, Inc. (Name of Corporation)
	MAILING ADDRESS OF CORPORATION
	1430 Fort Smith Blvd.
	Deltona, FL 32725
	PHONE
	(386) 257-1566

Area Code

Number

Ext.

ARTICLES OF INCORPORATION of

	•	•		
	Flor	rida Water Restoration & N	Mold Control, Inc.	
		(name of corporation		
The under adopt(s) the	signed acting as the ir following articles of i	ncorporators of a corporation unincorporation for such corporat	nder the Florida Businession:	S Corporation Act,
The name	of the corporation is:	ARTICLE I - CORPORA	ΓΕ NAME	OS J
		Florida Water Restoration &	Mold Control, Inc.	
This corpo	oration shall exist perp	ARTICLE II - DURA petually unless dissolved accord	- -	ED 3 AN 8: 09 Y OF STATE FEE, FLORIDA
		ARTICLE III - PURP	OSE	
The corpo	ration is organized for United States and the	r the purpose of engaging in an State of Florida.	y activities or business p	ermitted under the
	,	ARTICLE IV - CAPITAL issue 100 shares of comm ARTICLE V - INITIAL PRINC principal office and, if different	on stock, par value \$1	.00 per share.
STREET AD	DDRESS	• • •		
	1430 Fort Smith B	lvd.		
CITY	Deltona	FLORIDA	ZIP 32725	
Mailing a	ddress, if different	· · · · · · · · · · · · · · · · · · ·		
STREET AD	DDRESS Same	as above	F	
				,
CITY			ZIP	
The street		VI - INITIAL REGISTERED registered office and the name		gent at the office is:
NAME	Katsura Komatsu	12		
ADDRESS	1/30 Fort Smith Ph	-A	· · · · · · · · · · · · · · · · · · ·	

FLORIDA

ZIP 32725

CITY

Deltona

1. 5	
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,	AF	RTICLE VII – INITIAL BOARI	OF DIR	ECTORS	
acreased or d	iminished from time to irector(s) of the corpora		never be	less than one (1). The	e names and addres
NAME	Katsura Komatsu				
ADDRESS	1430 Fort Smith Blvd.				
CITY	Deltona	STATE FL		ZIP 32725	
NAME					
ADDRESS				-	
CITY		STATE		ZIP	
NAME					
ADDRESS					
CITY		STATE		ZIP	
NAME	Katsura Komatsu				
ADDRESS	1430 Fort Smith Blvd.	· ·			<u> </u>
CITY	Deltona	STATE FL		ZIP 32725	<u>. </u>
NAME		,			·
ADDRESS		<u>-</u>			
CITY		STATE		ZIP	···_
NAME					<u>.</u>
ADDRESS					
CITY		STATE		ZIP	
The undersi	igned incorporator(s) ha	ive executed these Articles of I	ncorporati	on this 3	1st
			RA	NOMATUN	(Signature)
					(Signature)

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE



	Florida Water Restoration & Mold Control, Inc.
Pursuant of F	lorida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above co	rporation, organized under the laws of the State of Florida with its registered office
as indicated i	n the Articles of Incorporation
at	1430 Fort Smith Blvd.
	Deltona, FL 32725
has named	Katsura Komatsu
located at the	aforesaid address, as its registered agent to accept service of process within this
state	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

KATSURA M	10MATSW	May 31, 2005
(Signature)	(Date)