

P05000087539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

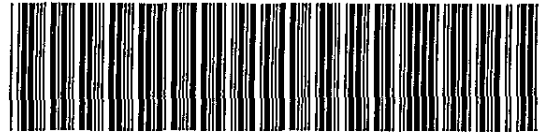
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400056196774

06/17/05--01061--001 \*\*87.50

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 JUN 17 AM 10:17

MRS  
6/20

## TRANSMITTAL LETTER

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

SUBJECT: Extreme Shine Mobile Detailing, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: Matthew L. Rogers  
Name (Printed or typed)

3226 Van Buren Avenue - GH  
Address

Naples, FL 34112  
City, State & Zip

239-503-5455  
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  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 JUN 17 AM 10:17

### ARTICLE I NAME

The name of the corporation shall be:

EXTREME SHINE MOBILE DETAILING, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3226 VAN BUREN AVENUE - GH  
NAPLES, FL 34112

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Title: P,VP,S,T  
MATTHEW L. ROGERS  
3226 VAN BUREN AVENUE - GH  
NAPLES, FL 34112

### ARTICLE VI REGISTERED AGENT

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

SHARON L. WORKMAN  
3226 VAN BUREN AVENUE  
NAPLES, FL 34112

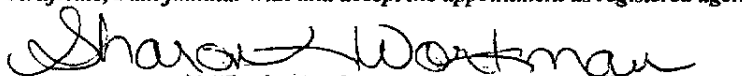
### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

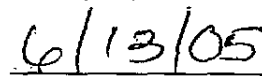
MATTHEW L. ROGERS  
3226 VAN BUREN AVENUE - GH  
NAPLES, FL 34112

\*\*\*\*\*

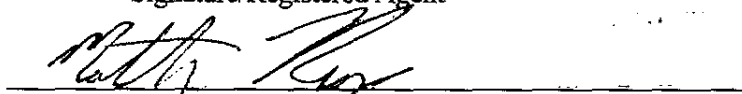
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



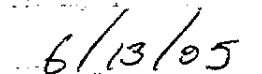
Signature/Registered Agent



Date



Signature/Incorporator



Date