

P05000124534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

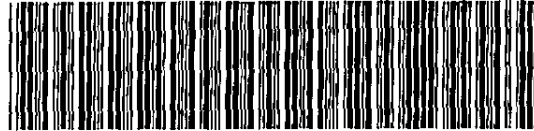
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only

*Kirkley Johnston* GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT *ASTRIDE V*  
DATE *9/13/05*  
DOC BY *Doris Brown*



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09/09/05--01008--008 \*\*78.75

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SECRETARY OF STATE  
DIVISION OF REGISTRATION  
05 SEP -9 PM 3:51

SEP 12 2005

## TRANSMITTAL LETTER

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

SUBJECT: ALL ABOUT CLEAN, 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: Kimberly Johnston  
Name (Printed or typed)

1991 Pioneer Tr  
Address

New Smyrna Bch., FL 32168  
City, State & Zip

386-690-5519  
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  
DIVISION OF CORPORATION

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**ARTICLE I NAME**

The name of the corporation shall be:

ALL ABOUT CLEAN, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1991 PIONEER TR.  
NEW SMYRNA BCH., FL 32168

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To transact any or all lawful business

**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):

Kimberly Johnston - P  
1991 Pioneer Tr.  
New Smyrna Bch., FL 32168

**ARTICLE VI REGISTERED AGENT**

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


Kimberly Johnston  
1991 Pioneer Tr.  
New Smyrna Bch., FL 32168

**ARTICLE VII INCORPORATOR**

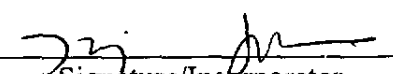
The name and address of the Incorporator is:

Kimberly Johnston  
1991 PIONEER TR.  
NEW SMYRNA BCH., FL 32168

\*\*\*\*\*  
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

9-7-05  
Date

  
Signature/Incorporator

9-7-05  
Date