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(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:			
(City/State/Zip/Phone #) City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Red	questor's Name)	
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Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Bus	siness Entity Nan	ne)
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	Certified Copies	Certificates	of Status
	Special Instructions to F	Filing Officer:	



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COVER LETTER

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

SUBJECT:	PELLIZZERI HOUSEKEEPING INC
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:
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: MICHAEL FERRARO	(Printed or typed)
196 E. NINE MILE RD	SUITE E
PENSACOLA FL 3253	34 State & Zip
850-475-4100 Daytime To	elephone number

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

Michael Ferraro CPA

Accounting and Tax Services 196 E. Nine Mile Road Ste. E Pensacola, FL 32534

Phone: (850) 475-4100 Fax: (850) 475-0011

Feb 24,2006

Dept of State Division of Corporations Box 6327 Tallahassee, FL 32314

To whom it may concern:

I Mellissa Pellizzeri wish to discontinue and have no intention of reinstating Pellizzeri Housekeeping Inc.document number P04000031112 therefore releasing the name to another entity.

Signature: Melissa Pellysen

STATE OF FLORIDA)
COUNTY OF ESCAMBIA)

DONNA CAIAZZO

MY COMMISSION # DD 149181

EXPIRES: September 24, 2006

1-800-3-NOTARY FL Notary Service & Bonding, Inc.

Personally Known____OR Produced Identification_

Type of Identification Produced FLORIDA Deiver's License

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: PELLIZZERI HOUSEKEEPING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business / mailing address is: 204 W. KINGFIELD RD CANTONMENT FL 32533

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any business or activity not prohibited by law.

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V REGISTERED AGENT

The name and Florida Street address of the registered agent is: MELISSA PELLIZZERI 204 W. KINGSFIELD RD **CANTONMENT FL 32533**

The above is accepting the designation as registered agent.

ARTICLE VI **INCORPORATOR**

The name and address of the Incorporator is: MELISSA PELLIZZERI 204 W, KINGSFIELD RD **CANTONMENT FL 32533**

NAME AND ADDRESS OF DIRECTORS/OFFICERS ARTICLE VI

MELISSA PELLIZZERI - PRESIDENT- 204 W. KINGSFIELD RD, CANTONMENT FL - OWNERSHIP 100%

3/1/06 3/1/06