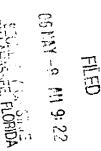
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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Office Use Only

CB 5-9.06

COVER LETTER*

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

SUBJECT:	OASTAL WIN	DOW PR	UDE SUFFIX)	eaning.
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	32165M	(Printed or typed) Address	25 H	
-	City,	State d Zip	<u> </u>	

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

Daytime Telephone number



April 17, 2006

SHALON BRIDGES 3216 SW 8TH CT CAPE CORAL, FL 33914

SUBJECT: COASTAL WINDOW & PRESSURE CLEANING INC.

Ref. Number: W06000016012

We have received your document for COASTAL WINDOW & PRESSURE CLEANING 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):

The document is illegible and not acceptable for imaging.

The attached form must be completed in order to file the document.

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) 245-6925.

Cynthia Blalock Document Specialist New Filing Section

Letter Number: 406A00022758

ARTICLES OF INCORPORATION	FILED
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	06, HAY -8 MB: 22
ARTICLE I NAME The name of the corporation shall be: OASHA WINOK	West-Plessure
Cleaning INC.	WISECT PLESTICE TAULAHASSEE, FLORIDA
The principal place of business/mailing address is:	J 34h Ct. 33914
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	Daggara
VVINCA	N+ PRESSURE
ADDICE HE SHAPES CLEANING	JA
ARTICLE IV SHARES The number of shares of stock is:	*)
·	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	110 SW BIT CA
LINNA POINTOCOUNTO	DE COPAL F7_ 2394
1 800 1 30	30 C.R (00)
Littley IDA CIGES- CUMPLE CO	DIAHA MS 3999L
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the register	ed agent is:
Shalon Bridger 32165W	ath (+
Jana John	1 5 22011
ARTICLE VII INCORPORATOR	FI, FL 359119
The name and address of the Incorporator is:	$W \cap$
LIMOA BALLES POPULATION	1530021
O CEIWIN,	13 NOST
**************************************	**************************************
certificate. I am familiar with and accept the appointment as registered agent and agree to act in	
O MANURI OUR	3- FOB
Signature/Registered Agent	2-00C
Signature/Incorporator	Date