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COVER LETTER

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

lax inc. TENAME-MUSTINCL	UDE SUFFIX)
cles of incorporation and	d a check for:
\$78.75	\$87.50
	Filing Fee,
	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	OPY REQUIRED
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	State & Zip

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



June 22, 2007

ANTHONY DENUSTA 3629 CAROLINE VALE BLVD JACKSONVILLEFL32277,

SUBJECT: QUALITY CARE JAX INC.

Ref. Number: W07000029721

We have received your document for QUALITY CARE JAX 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 must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6879.

Ruby Dunlap Regulatory Specialist New Filing Section

Letter Number: 307A00041356

ARTICLES OF INCORPORATION In compliance with Chapter (97 and/or Chapter (2), E.S. (Profit)		
In-compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME		
The name of the corporation shall be:		
Quality care lax inc.		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3629 Caroline Vale blvd. Jackson VIIIe Florida 32277		
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:		
To conduct deep cleaning of commercial restrooms.		
ARTICLE IV SHARES		
The number of shares of stock is:		
ALE TO THE TAKE TO THE TAKE TH		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s) address(ss) and specific title(s):		
List name(s), address(es) and specific title(s):		
Anthony S. Denusta - president Lori c. Denusta - Vice president Didi San Agustin - secretary		
Lovi c. Denusta - Vice president 55.5		
Anthony S. Denusta - president Fig. D. D. Lori C. Denusta - Vice president Fig. D. Didi San Agustin - sceretary		
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:		
Anthony Denusta		
3629 Caroline Valu Blvd. Jacksonville, Florida 32277		
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:		
Anthony Denusta 3629 caroline vale blvd Jacksonville Florida 32277		
3629 caroline vale blvd Jacksonville Florida 32277		

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		
\bigcirc \bigcirc \bigcirc \bigcirc		
Signature/Registered Agent June 15 2007 Date		
Date Date		
Signature/Registered Agent Date Date Signature/Incorporator Date		
Date Date		