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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: |
| White 12 |

Office Use Only



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01/09/09--01013--008 **78.75

2009 JAN 26 PH 4: 20 Seonetany of State Partainssee Florida

T. Buren JAN 2 7 2009

COVER LETTER

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

| SUBJECT: A | TLANTIC POWER | 2Wash INC | _ |
|----------------------|--|--|--|
| · | (PROPOSED CORPORA | TE NAME – <u>MUST INCI</u> | |
| Enclosed are an orig | inal and one (1) copy of the arti | cles of incorporation and | 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: | | Rek CIR | |
| | SchAsti Ar City 954 Daytime | , State & Zip 701 - 4977 Telephone number | 2958 |

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



January 12, 2009

DANA BROWN 580 CROSSDEER CIR SEBASTIAN, FL 32958

SUBJECT: ATLANTIC POWERWASH

Ref. Number: W0900001356

We have received your document for ATLANTIC POWERWASH and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected 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) 245-6928.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 009A00001023

RECEIVED

OB JAN 26 PM 3: 11

DIVISION OF CORPORATION

| ARTICLE 1 NAME The name of the companion shall be: |
|--|
| The name of the corporation shall be: |
| The name of the corporation shall be: Arlantic PewerWash INC SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| ARTICLE II PRINCIPAL OFFICE |
| The principal street address and mailing address, if different is: |
| 9611 N US HWY I Schastian FC 32958 SUITE 315 ARTICLE III PURPOSE |
| SEDASTIAN FC 32958 SUITE 315 |
| |
| The purpose for which the corporation is organized is: |
| PRESSURE WAShing Business. |
| ARTICLE IV SHARES |
| The number of shares of stock is: |
| 1,000 |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS |
| List name(s), address(es) and specific title(s): |
| DANA C BROWN PRES. |
| Sto ocossopeck cie |
| Sebasman, FC 32958 |
| ARTICLE VI REGISTERED AGENT |
| The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: |
| DANA C BROWN |
| 580 CROSSCREEK CIR SCHASTIAN, FC |
| ARTICLE VII INCORPORATOR 32958 |
| The <u>name and address</u> of the Incorporator is: |
| 11 JANA C BROWN, 580 OCCSS ORECH CIE Sebasi FC 32958 |
| 580 olcssoreth one Sebasific 32958 |
| 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 / / / / / / / / / / / / / / / / / / / |
| |
| Signature/Inecrporator DANA C BROW 1/7/69 Date |
| a Guardan Santa Caracter and Ca |

FILED

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