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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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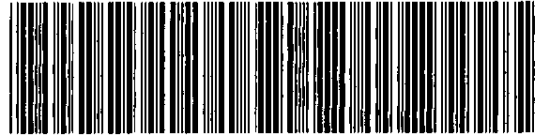
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-11-10 DOK

COVER LETTER

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

SUBJECT: Howard Advanced Pressure Cleaning ,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: Howard Folcarelli

Name (Printed or typed)

626 Russ Rd.

Address

Ft.Pierce,Florida 34982

City, State & Zip

772-971-2520

Daytime Telephone number

rwdrum@hotmail.com

E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be:

HOWARD ADVANCED PRESSURE CLEANING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

626 RUSS RD. FT PIERCE FL. 34982

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SERVICE PRESSURE CLEANING

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

HOWARD FOLCARELLI 626 RUSS RD. FT PIERCE FL 34982
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

HOWARD FOLCARELLI 626 RUSS RD. FT PIERCE FL 34982

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HOWARD FOLCARELLI 626 RUSS RD. FT PIERCE FL 34982

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

Howard Folcarelli
Signature/Registered Agent
Howard Folcarelli
Signature/Incorporator

1/1/10
Date
1/1/10
Date