

P10000057700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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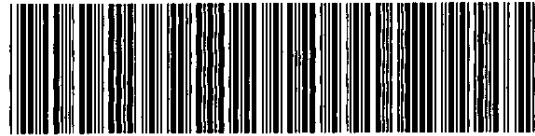
(Business Entity Name)

(Document Number)

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2010 JUL 12 P 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2010

DIANE GASPARINI
7617 CITA LANE UNIT 102 SUITE # 1
NEW PORT RICHEY, FL 34653

SUBJECT: QUALITY PM
Ref. Number: W10000031612

We have received your document for QUALITY PM and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words 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) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 310A00016202

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:

Quality PM, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*7617 Cita Lane Unit 102 Suite #1
New Port Richey, FL 34653*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Liability

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

[Signature]

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

*Diane Gasparini
7934 Sylvan Dr.
Hudson, FL 34667*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Diane Gasparini
7617 Cita Lane Unit 102 Suite #1
New Port Richey, FL 34653*

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

Diane Gasparini
Signature/Registered Agent

6/29/2010
Date

Diane Gasparini
Signature/Incorporator

6/29/2010
Date

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CLERK OF STATE
TALLAHASSEE, FL 32310