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COVER LETTER

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

SUBJECT: Advanced Leak Detection , 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	of
	_
FROM: Tyler D. Sewart Name (Printed or typed)	
1923 Fairway Circle East	
Dunedin, Florida 34698	2011
City, State & Zip	
727-734-3756	2
Daytime Telephone number	
tsjs456@tampabay.rr.com E-mail address: (to be used for future annual report notification)	Σ:

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

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

DATOLD II	DDIMOIDAI OPPICE			
RTICLE II	PRINCIPAL OFFICE Principal street address	Mailing	Mailing address, if different is:	
1	923 Fairway Circle East	ivizinig c	address, if different is.	
	unedin, Florida 34698			
- 1	HIMMI, LIMING VTVVI		· · · · · · · · · · · · · · · · · · ·	
RTICLE III	PURPOSE			
	hich the corporation is organized is:			
/ater conser	vation by providing a service in	which water lines and wa	ste lines are checked for	
eaks.				
RTICLE IV	SHARES res of stock is: 100,000			
e number of shar	es of stock is: 100,000	(
	INITIAL OFFICERS AND/OR DIRE	ECTORS		
Name and Ti	tle: Tyler D. Sewart - President	Name and Title:		
Address:	1923 Fairway Circle East	Address:		
	Dunedin, Florida 34698			
	tle: William A. Boner - V.P./Secretary/T	reasurer Name and Title:		
Address:	5253 Eagle Dr. Holiday, Florida 34698	Address:		
	Holiday, Florida 34698			
	itle:			
Address:		Address:		
סיוריו פי עו	REGISTERED AGENT			
	orida street address (P.O. Box NOT accep	otable) of the registered agent is:	75 20 20 E	
Name:	Tyler D. Sewart	·······		
Address:				
	1923 Fairway Circle East Dunedin, Florida 34698		> ₩₩	
	·		\$ 24 \$ 24	
	INCORPORATOR			
	dress of the Incorporator is:			
Name:	Tyler D. Sewart		12 m	
Address:	1923 Fairway Circle East			
	Dunedin, Flórida 34698		ु । 8	
aving been nan	ed as registered agent to accept service o	of process for the above stated con	poration at the place designated	
	m familiar with apti accept the appointme			
1			, ,	
1/1/11	at Aluna V	Pres.	E/19/11	
- yu	Required Signature/Registered A		Date	
<i>'</i>				
	ument and affirm that the facts stated he			
ocument to the L	Department of State constitutes a third deg	ree jeiony as provided for in s.817.	.155, F.S / 1	
	of along the	h	5/19/11	