P12000096846

| (Re | equestor's Name) | | |
|---|------------------|-----------|--|
| (Ac | ddress) | | |
| (Ac | ddress) | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |
| , | | | |
| | | | |

Office Use Only

112 F1 7 OC



900241166509

11/05/12--01031--014 **78.75

SECKETARY OF STATE VLLAHASSEC FLORID

12 NOV 21 AH 11: 3

MRD /12

COVER LETTER

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

| SUBJECT: Perf | formance Home | | |
|----------------------|--|-------------------------------------|--|
| , | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the arti | cles of incorporation and | d 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 CO | |
| FROM: | Alexander N Name D160 Sailwinds B | (Printed or typed) | |
| | | Address | |
| Lá | argo, Fl. 33773 | | |
| 72 | City, 2 7-743-2962 | State & Zip | |
| | Daytime T | elephone number | |
| | Apollo Plumbingina | Cyahoo. Con | notification) |

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



RECEIVED
12 NOV 21 AM II: 31

SECTIONAL OF STATE TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2012

ALEXANDER NOEL OTTENI 10160 SAILWINDS BLVD SO #203 LARGO, FL 33773

SUBJECT: PERFORMANCE HOME SERVICES, INC.

Ref. Number: W12000056398

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

List the corporation name in Article I of the form.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 212A00026986

ARTICLES OF INCORPORATION

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

| ARTICLE I The name of the | NAME corporation shall be: Ferforman | ce Home Services, Inc. |
|---------------------------------------|--|--|
| ARTICLE II | Principal of Street address | Mailing address, if different is: |
| | 10160 Sallwinds Blvd So # 203 | |
| | Largo, Fl. 33773 | |
| | | |
| ARTICLE III | PURPOSE | |
| The purpose for | which the corporation is organized is: | lunching hanne co. i's |
| | • | lumbing/home services |
| | | 9 |
| ARTICLE IV The number of sh | SHARES nares of stock is: | EECTORS Name and Title: |
| ARTICLE V | INITIAL OFFICERS AND/OR DIR | DECTORS TO THE TOTAL PROPERTY OF THE PERTY O |
| | Title: Alexander Noel Otteni | Name and Title: |
| Address: | 10160 Sailwinds Blvd So # 203 | Address: |
| | Largo, Fl. 33773 | |
| | | |
| Name and | Title: | Name and Title: |
| Address: | | |
| | | |
| | | |
| 3. 7 1 | Tr'ed | No d Tital |
| Address: | | Name and Title:Address: |
| Address. | | |
| | | |
| | | |
| ARTICLE VI | REGISTERED AGENT | . 11 X 6d |
| The name and F Name: | Florida street address (P.O. Box NOT acco | eptable) of the registered agent is: |
| Address: | 10160 Sailwinds Blvd So # 203 | |
| rearess. | Largo, Ft. 33773 | |
| | | |
| ARTICLE VII | | |
| · · · · · · · · · · · · · · · · · · · | ddress of the Incorporator is: | |
| Name: Address: | 10160 Saifwinds Blvd So # 203 | |
| Addiess. | Largo, Fl. 33773 | |
| | | of process for the above stated corporation at the place designated in nent as registered agent and agree to act in this capacity |
| | /\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | |
| X | | <u>oct 31, 2018</u> |
| | Required Signature/Registered A | Agent Date |
| | | and the second of the second o |
| I submit this do | cument and affirm that the facts stated h | erein are true. I am aware that the false information submitted in a gree felony as provided for in s.817.155, F.S. |
| aocument to the | Department of State Constitutes a third de | |
| | | N+ 31 2012 |
| | Required Signature/Incorpora | tor Date 0x + 31, 2012 |