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(Re	questor's Name)	
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: Var	o's Car Wash & [Detailing, Inc.	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d 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 PPY REQUIRED
FROM: E	vangeline Odom	ies	
1 KOM:	Nam	e (Printed or typed)	
18	300 NW 6th St		
		Address	
Fo	ort Lauderdale, F	FL 33311 , State & Zip	
9	54-482-2805	, vuiv w mp	

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

Daytime Telephone number

sunshine451@att.net

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

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

The name of the corporat	tion shall be: Van's Car Wash &	Detailing, Inc.	
1800 NW 6th	NCIPAL OFFICE Principal <u>street</u> address St	Mailing address, if diffe	erent is:
Fort Lauderda			
ARTICLE III PUR. The purpose for which the	POSE he corporation is organized is: Any and	d all lawful business.	
			20 CC
	TAL OFFICERS AND/OR DIRECTOR	<u></u>	OCT 30 PM 3: 09
Name and Title Address	Evangeline Odomes President	Name and Title:	
	1800 NW 6th St Fort Lauderdale, FL 33311		
Name and Title:		Address:	
		Name and Title:	
Address		Address:	-

I valific a	nd Title:	Name and Title:
Addres	SS	Address:
ARTICLE VI The <u>name and l</u>	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Evangeline Odomes	
Address:	1800 NW 6th St	
	Fort Lauderdale, FL 33311	
ARTICLE VII The name and a Name: Address:	INCORPORATOR address of the Incorporator is: Evangeline Odomes 1800 NW 6th St Fort Lauderdale, FL 33311	SECRETARY OF STATE OF CORPORATION
this certificate, l	I am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity 10/22/2013
Tottengelene (Odonus) Required Signature/Registered Agent		Date
	ocument and affirm that the facts stated herein are	true. I am aware that the false information submitted in a
document to the	e Department of State constitutes a third degree felon vgelive Odowes	10/22/2013