P9500005535

TRANSMITTAL LETTER

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL. 32314

SUBJECT: ____TOTAL MOBILE AUTO DETAILING, INC. _____

ENCLOSED IS AN ORIGINAL AND ONE COPY OF THE ARTICLES OF INCORPORATION AND OUR CHECK FOR \$__70.00 ____

FROM; NAME _____BILLY HOWELL _____
ADDRESS _____178 LOQUAT LANE _____
CITY _____PORT ORANGE _____
STATE _____FLORIDA 32127 ______
TELEPHONE ____904-788-5241 _____

600001383456 -01/18/95--01116--005 ******70.00 ******70.00

5006

ARTICLES OF INCORPORATION OF
TOTAL MOBILE AUTO DETAILING, INC
ACTION TO A MANUTA
ARTICLE INAME
THE NAME OF THIS CORPORATION SHALL BE
TOTAL MOBILE AUTO DETAILING, INC
ARTICLE IIPRINCIPAL OFFICE
ARTICLE IIPRINCIPAL OFFICE
THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE178 LOQUAT LANE
PORT ORANGE, FL. 32127
ARTICLE IIICAPITAL STOCK
THE NUMBER OF SHARES THAT THIS CORPORATION IS AUTHORIZED TO
HAVE OUTSTANDING AT ANY ONE TIME IS
HAVE OUTSTANDING AT ANY ONE TIME IS60, NO PAR60
HAVE OUTSTANDING AT ANY ONE TIME IS
HAVE OUTSTANDING AT ANY ONE TIME IS60, NO PAR
ARTICLE IVREGISTERED AGENT
HAVE OUTSTANDING AT ANY ONE TIME IS

PORT ORANGE, FL. 32127_____

ARTICLE V-INCORPORATORS

THE NAME(S) AND STREET ADRESS(ES) OF THE INCORPORATOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

BILLY HOWELL 178 LOQUAT LANE PORT ORANGE, FL. 32127

SUSAN HOWELL 17B LOQUAT LANE PORT ORANGE, FL. 32127

THE ART	TCLES ICLES	RSIGNI OF II	ED INCOM NCORPORM 19 95	ALTON	DR(S) THIS	HAS (HAVE	8 EXCR	TED DAY	THESE OF
SIG	NATURI	E_X	BU		An	rel	<i>;</i>		
SIG	NATURI	X	una	n Ha	<u> LUC</u>	44			
SIG	NATUR	=							

CERTIFICATION OF DESIGNATION-REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 717.0501, FLORIDA STATUTES. THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA.

1.	THE NAME OF THE CORPORATION ISTOTAL MOBILE AUTO DETAILING, INC
2.	THE NAME AND ADDRESS OF THE REGISTERED AGENT IS
	NAMEBILLY HOWELL
	ADDRESS178 LOQUAT LANE
	CITY/STATEPORT DRANGE, FL. 32127
OF DES APF CAF ALL OF	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS FOR THE ABOVE STATED CORORATION AT THE PLACE GIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE POINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS PACITY. I FURTHUR AGREE TO COMPLY WITH THE PROVISIONS OF STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE GIGATIONS OF MY POSITION AS REGISTERED AGENT.
	E (-5-95

84:1 Hd 81 NVF 56