

P95000024850

TRANSMITTAL LETTER

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

300001441133
-03/28/95--01043--005
*****78.75 *****78.75

SUBJECT: PERFECT TOUCH CLEANING INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: PERFECT TOUCH CLEANING INC.
Name (printed or typed)

13446 HEALD LANE APT # 4-B
Address

FORT MYERS, FLORIDA 33908
City, State & Zip

(813) 454-3639
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 4:07

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

KAN 3-28

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PERFECT TOUCH CLEANING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13446 HEALD LANE APT 4-B
FORT MYERS, FLORIDA 33908
LEE COUNTY

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GINA D. KABAT
13446 HEALD LANE APT# 4-B
FORT MYERS, FL 33908

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 4:08

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GINA D. KABAT
13446 HEALD LANE APT# 4-B
FORT MYERS, FL 33908

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22nd day of March, 19 95.

Gina D. Kabat
Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

Perfect Touch Cleaning Inc.

1. The name of the corporation is: PERFECT TOUCH CLEANING INC.

2. The name and address of the registered agent and office is:

GINA D. KABAT (Name)

13446 HEALD LANE APT#4-B, FORT MYERS, FL 33908
(P.O. Box or Mail Drop Box **NOT** acceptable)

FORT MYERS, FL 33908

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Gina D. Kabat
(Signature)

3-22-95
(Date)