P950000 30161

12 m 200 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): Touch Enterprises FAC 900001454439 04712755--01065--016 2. ****122.50 ****122.50 (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Examiner's Initials

Trademark

Other

CR2E031(10/92)

ARTICLES OF INCORPORATION

of

	OI OI				
	Personal Touch Enterprises, Inc.		7 SE 95		
The understa	(name of corporation)				
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.					
ARTICLE I - CORPORATE NAME					
The name of	The name of the corporation is:				
	Personal Touch Enterpri	ses, Inc.	<u>Ş</u> î. <u>Q</u>		
	ARTICLE II - DU	RATION			
This corporat	tion shall exist perpetually unless dissolved accord	ling to Florida law.			
	ARTICLE III - PU				
The corporati United States	ion is organized for the purpose of engaging in any and the State of Florida.	activities or business permitted	under the laws of the		
	ARTICLE IV - CAPIT	AL STOCK			
The corporati	on is authorized to issue <u>Five</u> Hundred	shares (500) of	One		
Dollar(s) (\$_		which shall be designated "Co	mmon Shares."		
	ARTICLE V - INITIAL REGISTERE	D OFFICE AND AGENT			
The street add	dress of the Initial Registered Agent office and the		gent at that office is:		
NAME	Raphael Wolfe		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
ADDRESS	4611 S. University Drive, Suite 412				
СПУ					
	Miramar office, if known, or the mailing adress of the co	FLORIDA :	ZIP 33025		
NAME	Personal Touch Enterprises, Inc.	potation	-		
ADDRESS	4611 S. University Drive, Suite 412				
CTTY	Davie	FLORIDA	ZIP 33328		
This corporation increased or conditions addresses of the second	on shall have Two 2 direct liminished from time to time by the By-Laws, but the initial director(s) of the corporation are as for	tors initially. The number of dir	rectors may be either 1). The names and		
NAME	Raphagl Wolfe	·····			
ADDRESS	2221 S. Sherman Circle, Suite 504				
CITY	Miramar	STATE	ZIP 33025		
NAME	Violet Wolfe				
ADDRESS	2221 S. Sherman Circle, Suite 504				
CTTY	Miramar	STATE	ZIP 33025		
NAME					
ADDRESS					
СПҮ		STATE	ZJP		
FORM 215: ARTI	CLES OF INCORPORATION, PAGE 1 PAGE 1		SEMINOLE-MIAMI 012593		

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Raphael Wolfe		
ADDRESS	2221 S. Sherman Circle, Suite,504		
CITY	Miramar	STATE Florida	zip 33025
NAME	Violet Wolfe		
ADDRESS	2221 S. Sherman Circle, Suite, 504		
СПУ	Miramar	STATE Florida	1 ZIP 33025
NAME			
ADDRESS			
CTTY		STATE	ZIP

IN WITNESS WHERE	OF, the undersigned su	bscriber(s) have exe	cuted these Ar	ticles of Incorporation	this 10
day of <u>April</u>	, 19 <u>_95</u>		?		
	Ü	•		Alose an	
		Violet	Weefe	(Secretary)	(Scal)
					(Seal)

OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT	95 SE(
OF	AR T	l
	12 SSEE	: 1
Personal Touch Enterprises, Inc.		j
(name of corporation)	A CO	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

	Davie, Florida	33328		
has named	Raph	ael Wolfe	wy de la constant	

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

P95000030161

				•
Tropical Cleaning Services 4611 S. University Dr Suite 412 Davie, FL 33328			Office Use Only	
City/ Sta	ite/Zip	Fione #		Office Use Only
CORPORATIO	N NAME(S)	& DOCUMENT I	NUMBE	R(S), (if known):
l(C	orporation Name)	· · · · · · · · · · · · · · · · · · ·	(Docume	nt #)
2			•	,
(Co	orporation Name)		(Docume	nt #)
3(Co	orporation Name)		(Documer	
4.	r p e runen (ribite)		(1)Ocuille	u #)
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₩alk in	Pick up tin	ne	_	Certified Copy
Mail out	☐ Will wait	Photocop	y [Certificate of Status
NEW FILINGS	AME	NDMENTS		
Profit	Amend	lment		
NonProfit	Resigna	stion of R.A., Officer/ I	Director	400001705594 -02/02/9601081026 *****35,00 *****35,00
Limited Liability	Change	of Registered Agent		*****35.00 *****35.00
Domestication	Dissolu	tion/Withdrawal		
Other	Merger			
OTHER FILINGS	THE PERSONS	GISTRATION/	E)	•
	RECOU	GISTRATION/SALIFICATION		VS FEB 6 199 6
Annual Report	Foreign			VS FEB 6 1996 OLD Nesig.
Fictitious Name		Partnership	1	OLD resig.
Name Reservation	Reinstate		1	′
	Tradema	ark	1	
			J	

Other

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

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That the corporation has been notified in writing of the resignation.

(Signature of resigning officer/director

FILING FEE IS \$35.00

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