10004/01A



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

SCHOOL 1456165 -05/23/35--01030--005 +++++70.75 *++++70.75

SUBJECT: True Blue Pressure Clenning TNC.
(Proposed corporate name - must include suffix)

	original and one () copy of the artic	les of incorporation a	and a check
for : \$70 Filing	0.00 X \$78.7 Fee Filing Fe & Certifica	e Filing Fee	Filing Fee,	,
	FROM: Char	les Wanto	uck JR	
	130	<u>50 SW 9 St</u>	<u> </u>	
		Address		
	DAVI		3325	
	,	City, State & Zip		
Charles	Montre Cov	305) 472 aytime Telephone num	4974 ther	
AUTHORIZATION CORRECT COAL		-,		
DATE 5/3/4/95	P			
DOC EXAM MONTE	Drown			

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

D. BROWN MAY 2 4 1995

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:

True Blue Pressure Cleaning INC.

ARTICLE II PRINCIPAL OFFICE

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

13050 SW 9st DAVIE FlA 33325

ARTICLE III SHARES

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

NONE At the mompont

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Aloberta Wantuck 13050 SW 9 ST Davie Fla 33325

ARTICLE V INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation Is(are):
+ Plan Dessure Clemning Inc.
true Dive production of the state of the sta
13050 SW 954 Charles Munituen
True Blue Pressure Clemning Inc. 13050 SW 954 Charles Mantuck DAVIE FIN 33325 Roberta Wantuck
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
3 day of April , 19 95.
Charl Water The
Roberts Wantuck
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.

1,	The name of the corporation is: True Blue Pressure
	Cleaning Inc
2.	The name and address of the registered agent and office is:
	Roberta Wantick 8
	<u> /3050 Sω 9 S †</u> (P.O. Box <u>not</u> acceptable)
	Davie F/ 33325 Grand (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.

Roberta Osignature 4-3-95 (Date)

	THE PERSONS REFE	FORE COMPLETING THIS FORM.	
PLEASE READ APPLICATION FOR REINSTATEMENT	ALL INSTRUCTIONS DEE FLORIDA DEPARTMENT OF Sandra B. Mariban Sacrotary of State DIVISION OF COMPONATION)	
OCUMENT # P9500	00041012	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Corporation Nation RUE BLUE PRESSURE CLE		MELIANASSEE, PLONIDA	
	Manury Andress		
13050 SOUTH WEST 9TH STREET DAVIE FL 33325			
DAVIE FL 33325	•	REINSTATEMENT 910	
If above addresses are incorrect in any way, line Now Principal Office Address. If Applicable	through incorrect information and enter corre-	plicable 4. Date Incorporated or Qualified To Do Business in Florids (65/22/1995) Applied For	
Stute, Apt. #, otc.	Buita, Apt. N. ale	5. FEI Number (55-059658) Not Applicable	
City & State	City & State Very US 1 F Country	CERTIFICATE OF STATUS DESIRED	
3 960 Country High Lands 7. Names and Street Addresses of Each Officer	and/or Director (Florida nonprofil corporation	ions must list at least 3 directors) On Address of Each City / State / Zip	
Title(s) and/or Director	Siloon Office 3 (Do NOT Use F	of Addition Director (or and/or Director of Post Office Box Numbers)	
1 2	stuck 171 mark	Ks Revenus/1 Verios	
V.Pr Charles W	antuck 171 marks	300002001233-9 -11/08/96-01118-027 ****236.25 ****236.25	
		300020012333 -11/08/9601118028 -14/47,50 ****147,50	
		941-6-96	
B. Name and Address of	Current Registered Agent	Name and Address of New Registered Agent Name	
		Street Address (P.O. Box Number is Not Acceptable)	
WANTUCK, ROBERTA 13050 SOUTH WEST 9TH STREE	ī	Suito, Apt. #, Etc.	
DAVIE FL 33325		City FL	
10. I, being appointed the registered agent	of the above named corporation, am familiar v	or with and accept the obligations of Section 607.0505, F.S. Date	
Signature of Kobecta	REGISTERED AGENT MUST SIGN	V (Cap other side for information	
11. Does this corporation Dept. of Revenue un	n pay any intangible tax to t der S. 199.032, Florida Sta	tatutes. Yes No No Light Section 17 Es. I further certify that when filling	
L certify that I am an officer or director this reinstatement application, the reasoned by the corporation have been pon this application is true and accurate.	or the receiver of trustee ampowered, the co son for dissolution has been eliminated, the co sid and the names of individuals listed on this s, and my signature shall have the same legal s,	ocute this application as provided for in chapter 607 or 617, F.S. I further certify that when it is corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all less corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S. The Information indicates its form do not quality for an exemption under section 119.07(3)(i), F.S. The Information indicates all leftect as it made under eath.	
Polar	to Mantuck	Date Daytime Phone #	
SIGNATURE: SIGNATURE AND T	YPED OR PRINTED NAME OF SIGNING OFFICER	entant.	