

995000045237

TRANSMITTAL LETTER

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

400001496494  
-05/23/95--01064--009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: SPARKLE MAID SERVICES, INC.  
(Proposed corporate name - must include suffix)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 JUN 12 AM 8:08

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: HELEN E. KEOHANE  
Name (printed or typed)

5265 SW 92 TERRACE  
Address

COOPER CITY, FL. 33328  
City, State & Zip

(305) 434-5108  
Daytime Telephone number

W95-11042

6/6/95

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

May 26, 1995

HELEN E. KEOHANE  
5265 SW 92 TERRACE  
COOPER CITY, FL 33328

SUBJECT: SPARKLE MAID SERVICES INC.  
Ref. Number: W95000011042

We have received your document for SPARKLE MAID SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6928.

Agnes Bundick  
Corporate Specialist

Letter Number: 195A00026753

## ARTICLES OF INCORPORATION

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JUN 12 AM 8:08

*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: SPARKLE MAID SERVICES INC.

### ARTICLE II PRINCIPAL OFFICE

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

5265 SW 92 TERRACE  
COOPER CITY, FL. 33328

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: ~~1000~~ 1000 SHARES PAR VALUE OF 1.00

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HELEN E. KEOHANE  
5265 SW 92 TERRACE  
COOPER CITY, FL. 33328

**ARTICLE V INCORPORATOR(S)**

See instructions for officers/directors

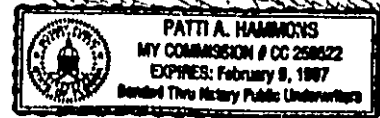
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

HELEN E KEOHANE  
5265 SW 92 TERRACE  
COOPER CITY, FL. 33328

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

17 day of may, 19 95.

Helen E. Keohane  
Signature



\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE:** Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 JUN 12 AM 8:08**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:

SPARKLE MAID SERVICES INC.

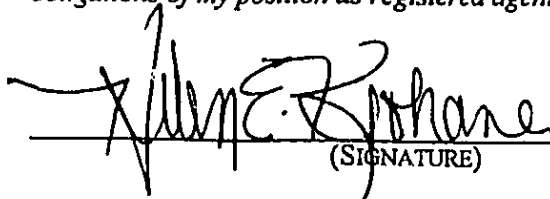
2. The name and address of the registered agent and office is:

HELEN E. KEOHANE  
(NAME)

5265 SW 92 TERRACE  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

COOPER CITY, FL. 33328  
(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.*

  
(SIGNATURE)

5.16.95  
(DATE)