TRANSMITTAL LETTER Department of Street Division of Gapoutum P. O. Bo 65, FL 32314 Tallians St., FL 32314

(Proposed corporate name - must include suffix)

SUBJECT: TROPICAL KLEAN IT ALL INC.

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Enclo	sed is an origina	af and one (1) co	ppy of the articles of	incorporation	and a chec	:k	
	\$70.00 Filing Faa	xx \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	#131.25 Filing Fee, Cortified Copy & Certificate Required	96 JUN 26	724	
	FROM:	Name (RTO_OLIVEIRA printed or typed)		H 26 PH 12: CY		
	Address Address						
		POMPANO BE	ACH, FL ~ 3306 , State & Zip	0			
Daytime Telephone number							
		e	6HT 691				
			Mala-	1248	1		

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 12, 1996

JOSE ALBERTO OLIVEIRA 1500 N.E. 4TH #A POMPANO BEACH, FL 33060

SUBJECT: TROPICAL KLEAN-IT-ALL, INC. Ref. Number: W96000012481

We have received your document for TROPICAL KLEAN-IT-ALL, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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) 487-6925.

Brenda Baker Corporate Specialist

Letter Number: 396A00029238

ARTICLES OF INCORPORATION FILED

96 JUN 26 PM 12: 25

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

ARTICLE NAME

The name of the corporation shall be: TROPICAL KLEAN-IT-ALL INC.,

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1500 NE 4 ST #A - POMPANO BEACH, FL - 33060

ARTICLE III **SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 (five hundred) shares-U\$1.00 (one dolar) each one.

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

Jose Alberto Oliveira 1500 NE 4ST #A - POMPANO BEACH,FL - 33060

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):

JOSE ALBERTO OLIVEIRA 1500 NE 4ST #A - POMPANO BEACH,FL - 33060

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

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

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 co	poration is: TROPICAL	L KLEAN-IT-AL	L_INC.,	
2. The name and adds	ress of the registered age	ent and office is:		4.0 8 mg
•••	JOSE ALBERTO OL	IVEIRA (NAME)		MIL 26 P
	1500 NE 4 ST #A (P.O. Box or Mail D	rop Box NOT ACCEPT	ABLE)	Wis 25
	POMPANO BEACH,	F1. 33060 Y/State/Zip)		7
orporation at the plac igent and agree to act elating to the proper a	as registered agent and e designated in this cert in this capacity. I furth nd complete performanc ion, as registered agent.	ificate, I hereby ac ter agree to comply	cept the appoint	ment as registered
	(SIGNATURE)		06/06/ (DATE)	<u>'9r</u>

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