

960000070337

TRANSMITTAL LETTER

96 AUG 23 AM 11:32

DIVISION OF CORPORATION

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

2000012500512
-08/23/96--01033--023
****100.00 ****100.00

SUBJECT: CARPET DOCTORS 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:

CARPET DOCTORS INC.

Name (printed or typed)

204 LITTLE TOWN RD.

Address

PORT PLAGE, FL 32127

City, State & Zip

(904) 322-3863

Daytime Telephone number

96 AUG 23 AM 11:31
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL AUG 23 1996

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

ARTICLES OF INCORPORATION

FILED

06 AUG 23 AM 11:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

CARPET DOCTORS INC

ARTICLE II PRINCIPAL OFFICE

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

804 LITTLE TOWN RD.
PORT ORANGE, FL 32127

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARK A. NICEWANDER
804 LITTLE TOWN RD.
PORT ORANGE, FL 32127

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):

MARK A. NICIEWANDER
804 LITTLE TOWN RD
PORT ORANGE, FL 32127

MIKE LUCE
4489 CHALMETTE CT.
PORT ORANGE, FL
32127

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

23 day of AUGUST, 19 96.

(An additional article must be added if an effective date is requested.)



Signature



Signature

Signature

Notarization is not required

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

96 AUG 23 AM 11:31

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:

CARPET DOCTORS INC.

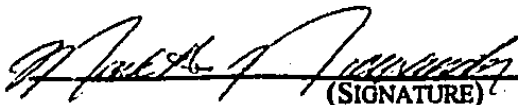
2. The name and address of the registered agent and office is:

MARK A. DICKENWANDER
(NAME)

804 LITTLE TOWN RD.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PORT ORANGE, FL 32127
(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)

8/23/96
(DATE)

P96000070337

CARPET DOCTORS
804 LITTLE TOWN ROAD
PORT ORANGE, FL 32127

MARK A. NICEWANDER

(904) 760-0613

Office Use Only

FILED
97 JAN 29 AM 11:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COMPANION NAME(S) & DOCUMENT NUMBER(S), (if known):

- _____
(Corporation Name) (Document #)
- _____
(Corporation Name) (Document #)
- _____
(Corporation Name) (Document #)
- _____
(Corporation Name) (Document #)

- Walk in
- Mail out
- Pick up time _____
- Will wait
- Certified Copy
- Certificate of Status
- Photocopy

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

600002072276--3
-01/23/97--01041--017
*****43.75 *****43.75

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

VS FEB 5 1997

Uoldis

Examiner's Initials	
---------------------	--

ARTICLES OF DISSOLUTION

FILED
17 JAN 29 AM 11:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: CARPET DOCTORS INC

SECOND: The articles of incorporation were filed on: 8-23-96

THIRD: (CHECK ONE)

- None of the corporation's shares have been issued.
- The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

- A majority of the incorporators authorized the dissolution.
- A majority of the directors authorized the dissolution.

Signed this Jan day of 23, 19 97.

Signature Mark A. Nicewander
(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

MARK A NICEWANDER
(Typed or printed name)

PRESIDENT
(Title)