

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000071055

FILED
Oct 05, 2010
Secretary of State

Entity Name: PERFECTLY CLEAN OF COLLIER COUNTY, INC.

Current Principal Place of Business:

1060 COLLIER CENTER WAY
NAPLES, FL 34110

New Principal Place of Business:

429 FLAMINGO AVE
NAPLES, FL 34110

Current Mailing Address:

1060 COLLIER CENTER WAY
NAPLES, FL 34110

New Mailing Address:

2016 AUTUMN BLOSSOM LANE
MARVIN, NC 28173

FEI Number: 65-0699260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEY, NANCY I
429 FLAMINGO AVE.
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

ALLEY, NANCY I
429 FLAMINGO AVE
NAPLES, FL 34108 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: NANCY ALLEY

10/05/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ALLEY, NANCY
Address: 429 FLAMINGO AVE.
City-St-Zip: NAPLES, FL 34108

Title: VP
Name: ALLEY, NANCY
Address: 429 FLAMINGO AVE.
City-St-Zip: NAPLES, FL 34108

Title: S
Name: ALLEY, NANCY
Address: 429 FLAMINGO AVE.
City-St-Zip: NAPLES, FL 34108

Title: T
Name: ALLEY, NANCY
Address: 429 FLAMINGO AVE.
City-St-Zip: NAPLES, FL 34108

Title: VP
Name: ALLEY, NANCY
Address: 429 FLAMINGO AVE.
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NANCY ALLEY

PRES

10/05/2010

Electronic Signature of Signing Officer or Director

Date