

P 960000 76832

Law Offices
Vanner, Stafford & Seaman
A Professional Association
23211 TENTH AVENUE NORTH
SUITE 202
LAKE WORTH, FLORIDA 33461

September 10, 1996

Secretary of State
DIVISION OF CORPORATIONS
PO Box 6327
Tallahassee, FL 32314

000001947030
-09/13/96--01033--018
****122.50 ****122.50

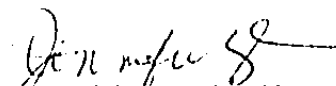
Re: Palm Beach Carpet & Upholstery Care, Inc.

Dear Sir/Madam:

Enclosed please find an original and one copy of Articles of Incorporation with regard to the above-named new corporation. Please also find enclosed our firm's check in the amount of \$122.50 representing your filing fees.

Please file the Articles of Incorporation and return a conformed copy to me in the envelope provided.

Very truly yours,


Jennifer Wojtylko

ENCLOSURE

SEP 16 1996

ARTICLES OF INCORPORATION

OF

PALM BEACH CARPET & UPHOLSTERY CARE INC.

FILED
95 SEP 13 PM 12:57
PALM BEACH, FLORIDA

The undersigned subscribers to these Articles of Incorporation, being natural persons competent to contract, hereby form a corporation under and pursuant to the laws of the State of Florida providing for the formation, liability, rights, privileges and immunities of corporations for profit, and for that purpose, hereby certify, declare and set forth as follows, to wit;

ARTICLE I

NAME

The name of the corporation shall be:

PALM BEACH CARPET & UPHOLSTERY CARE INC.

ARTICLE II

GENERAL NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE III

CAPITAL STOCK

The capital stock of this corporation shall be Five Hundred Shares (500) at \$1.00 per share par value. All of said stock shall be payable in cash, property, real or personal, labor or services in lieu of cash, at a just valuation to be fixed by the stockholders of this corporation.

ARTICLE IV

CAPITAL TO BEGIN BUSINESS

The amount of capital with which this corporation shall commence business shall be Five Hundred Dollars (\$500.00).

ARTICLE V

CORPORATE EXISTENCE

This corporation shall exist perpetually unless sooner dissolved according to law.

ARTICLE VI

PRINCIPAL PLACE OF BUSINESS

The principal place of business of said corporation shall be 6363-C Seven Springs Blvd., Lake Worth, Florida with the privilege of having branch offices at other places within or without the State of Florida.

ARTICLE VII

REGISTERED OFFICE AND REGISTERED AGENT

The name of the corporation's registered agent is Jennifer Wojtylko, 6363-C Seven Springs Blvd., Lake Worth, Florida.

ARTICLE VIII

OFFICERS AND DIRECTORS

The names and addresses of the first directors and officers of the corporation who shall hold office for the first year or until their successors are chosen shall be:

<u>NAME</u>	<u>ADDRESS</u>	<u>OFFICE</u>
Ellen Hotz	220 North Country Club Dr. Atlantis, FL	President/Secretary
Jennifer Wojtylko	6363-C Seven Springs Blvd. Greenacres, FL 33463	V. President/Treasurer

This corporation shall have at least one, but not more than four directors, and no person shall be required to own, hold or control stock in the corporation as a condition precedent to holding an office in this corporation.

ARTICLE IX

SUBSCRIBERS

The names and addresses of the subscribers to these Articles of Incorporation and the number of shares of stock each agrees to take are as follows:

<u>NAME</u>	<u>ADDRESS</u>	<u>NO. OF SHARES</u>
Ellen Hotz	220 N. Country Club Drive Atlantis, FL	130
Jennifer Wojtylko	6363-C Seven Springs Blvd. Greenacres, FL 33463	130
Thomas Hotz	220 N. Country Club Drive Atlantis, FL	120
Wade Wojtylko	6363-C Seven Springs Blvd. Greenacres, FL 33463	120

ARTICLE X

Shares of stock held by the initial shareholders may not be resold or otherwise transferred to other persons unless such shares are first offered to the remaining shareholders of to this corporation. The price and terms at which, and the time within which, such shares may be offered and sold shall be further specified by written agreement among all of the shareholders and this corporation.

ARTICLE XI

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares), at the price at which it is offered to others.

ARTICLE XII

This corporation reserves the right to amend, alter, change or repeal any provisions contained in these Articles of Incorporation in the manner now or hereafter prescribed by statute. Directors of this corporation shall have the power to make or amend the By-laws and to fix any amount to be reserved for working capital.

The private property of the stockholders shall not be subject to the payment of the corporate debts in any extent whatsoever. The corporation shall have first lien on the shares of its members and upon the dividends due them for any indebtedness of such members to the corporation.

IN WITNESS WHEREOF, the undersigned being the original subscriber to the Articles of Incorporation herein, for the purpose of forming a corporation to do business both within and without the State of Florida, under the laws of Florida, do make and file these Articles, hereby declaring and certifying that the fact herein stated are true, this 9th day of ~~August~~ September 1996.

Dan Cornille
Witness

Ellen Hotz
Ellen Hotz

Lisa M. King
Witness

Dan Cornille
Witness

Jennifer Wojtylko
Jennifer Wojtylko

Lisa M. King
Witness

STATE OF FLORIDA)

COUNTY OF PALM BEACH)

I, the undersigned officer, duly authorized to take acknowledgements and administer oaths in the State of Florida at Large, hereby certify that before me personally appeared ELLEN HOTZ and JENNIFER WOJTYLKO, to me well know to be the individual(s) described herein and who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this

10th day of ~~August~~ September, 1996.

Mary L. Mitchell
Notary Public,
State of Florida

My commission expires:



MARY L. MITCHELL
My Commission 00301553
Expires Aug. 14, 1998

CERTIFICATE OF REGISTERED AGENT
OF
PALM BEACH CARPET & UPHOLSTERY CARE, INC.

Having been named as resident agent for the above-stated corporation, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I accept the duties and obligations of §607.0505, Florida Statutes.


Jennifer Wojtylko, Registered Agent

FILED
96 SEP 13 PM 12:51
TALLAHASSEE, FLORIDA

Palm Beach Carpet and Upholstery Care

220 North Country Club Drive

Atlanta, Florida 33462-1114

Tel: (561) 966-2908

Fax: (561) 967-0567

~~P96000076832~~

December 30, 1996

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Re: Corporate Mailing Address Change

To Whom it may concern,

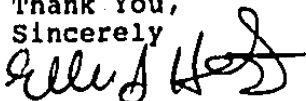
Please be advised of a new Corporate address for PALM BEACH CARPET & UPHOLSTERY CARE INC., DOCUMENT NUMBER P96000076832 is as follows:

220 N. Country Club Drive

Atlanta, FL 33462-1114

Please update your computer filing to reflect this change effectively immediately.

Thank You,
Sincerely



Ellen Hotz, President

Palm Beach Carpet &

Upholstery Care Inc.

(561)966-2908

"Quality is everything"

KS/1

P9600076832

Section 215.26, Florida Statutes, states in part: "Applications for refund, as provided in this section, shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: JENNIFER Wojtylko EIN or SSN: 262-17-9374

Address: 6363-C Seven Springs Blvd.
Greenacres, FL 33463

Amount: \$35.00 Date Paid _____

Reason for claim: Resigned as Vice President, Treasurer of
Palm Beach Carpet & Upholstery Care, Inc - Sent Resignation to
FLA Dept of State - they sent letter indicating they did not have
me listed as an officer.

Certified true and correct this 21 day of March, 1997.

Signature Jennifer Wojtylko

* Must be completed if authority is other than Section 215.26, Florida Statutes.

LFJ/AMENDMENT SECTION

For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim.	Amount of recommended refund \$ <u>35.00</u>
The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on	
State Treasurer's Receipt No. <u>01039-005</u> dated <u>3-7-97</u>	
Name of Account _____	
<u>45202130001453000000000010000</u>	
Statutory Authority for Collection <u>607.0122</u>	
It is requested that payment be made from the following account	
NAME OF ACCOUNT _____	
<u>452021300014530000000022002000</u>	
Certified true and correct this _____ day of _____, 19____	
Department of State, Division of Corporations (Agency)	(Authorized Signature and Title)

Requestor's Name

Law Offices
Varnor, Stafford & Scaman
A Professional Association
2328 TENTH AVENUE NORTH
SUITE 202
LAKE WORTH, FLORIDA 33461

Office Use Only

BER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

500002107055--7
-03/07/97--01039--005
*****35.00 *****35.00

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

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

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

~~* 789, 581, 133, 671 *~~

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 11, 1997

Varnier, Stafford & Seaman, P.A.
2328 Tenth Avenue North
Suite 202
Lake Worth, FL 33461

SUBJECT: PALM BEACH CARPET & UPHOLSTERY CARE, INC.
Ref. Number: P96000076832

We have received your document for PALM BEACH CARPET & UPHOLSTERY CARE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records do not indicate that you are an officer, director, or registered agent of the subject corporation. Therefore, no resignation is required.

Please complete the enclosed refund application and return it to this office for processing.

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) 487-6910.

Louise Flemming-Jackson
Corporate Specialist Supervisor

Letter Number: 397A00012335

P9600076832

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Requestor's Name

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A Professional Association
2325 TENTH AVENUE NORTH
SUITE 202
LAKE WORTH, FLORIDA 33461

Office Use Only

BER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #) 500002107055--7
-03/07/97--01039--005
*****35.00 *****35.00
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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

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~~*789, 581, 133, 671*~~



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 11, 1997

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