Requestor's Name 96 OCT 14 AM 9: 15 SECRETARY OF STATE TALLAHASSEE, FLORIDA Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy ☐ Will wait Photocopy ☐ Mail out Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS **QUALIFICATION** Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 20, 1996

SHORELINE BUILDERS, INC. 805 LA PALOMA RD KEY LARGO, FL 33037

SUBJECT: HEAVENLY MAIDS INC. Ref. Number: W96000019882

We have received your document for HEAVENLY MAIDS INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

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) 487-6915.

Letter Number: 296A00043526

Pamela Hall Document Specialist

ARTICLES OF INCORPORATION OF HEAVENLY MAIDS INC.

FILED

96 OCT 14 AM 9: 16

- THE NAME OF THE CORPORATION IS: <u>HEAVENLY MAIDS INC. TAECAHASSEE</u>, FLORIDA THE PRINCIPAL OFFICE ADDRESS IS 805 LAPALOMA ROAD, KEY LARGO, FLORIDA 33037.
- 2). THE PURPOSE OF THIS CORPORATION IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A CORPORATION MAY BE ORGANIZED UNDER THE GENERAL CORPORATION LAW OF THE STATE OF FLORIDA.
- 3). THE REGERESTERED AGENT IS CHERYL SHALVATIS, 805 LAPALOMA ROAD, KEY LARGO, FLORIDA 33037.
- 4). THIS CORPORATION IS AUTHORIZED TO ISSUE ONLY ONE CLASS OF STOCK WHICH SHALL BE DESIGNATED COMMON STOCK. THE TOTAL NUMBER OF SHARES IT IS AUTHORIZED TO ISSUE IS ONE THOUSAND SHARES.
- 5). THE NAMES AND ADDRESSES OF THE PERSONS WHO ARE APPOINTED TO ACT AS THE INITIAL DIRECTORS OF THE CORPORATION ARE:

CHERYL SHALVATIS 805 LAPALOMA ROAD, KEY LARGO, FLORIDA 33037

HEIDI KIEFER 226 BUTTONWOOD AVE. KLTV, KEY LARGO, FLORIDA 33037

- 6). THE LIABILITY OF THE DIRECTORS OF THE CORPORATION FOR MONETARY DAMAGES SHALL BE ELIMINATED TO THE FULLEST EXTENT POSSABLE UNDER THE LAWS OF THE STATE OF FLORIDA.
- 7). THE CORPORATION IS AUTHORIZED TO INDEMNIFY THE DIRECTORS AND THE OFFICERS OF THE CORPORATION TO THE FULLEST EXTENT PERMISSIBLE UNDER THE LAWS OF THE STATE OF FLORIDA.
- 8). I CHERYL SHALVATIS, THE REGERESTERED AGENT FOR "HEAVENLY MAIDS INC." HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID CORPORATION.

CHERYL SHALVATIS, REGISTERED AGENT

HEAVENLY MAIDS INC.

IN WITNESS WHEREOF.

ELIZABETH A. NORTON
MY COMMISSION # CC 553128
EXPIRES: May 8, 2000
Bonded Thru North Prints 19

2)00

Chry Shalvate President Heide m. Huft Vic President

P96000084387

ME HEIDE -F.OBO KCY LARGE	M. KIEFER (2102), PL 33037-7102	
City/State	/Zip Phone #	Office Use Only
CORPORATION	NAME(S) & DOCUMENT NU	JMBER(S), (if known):
1.		
1(Cor	poration Name)	(Document #)
2(Cor	poration Name)	(Document #)
		,
3(Cor	poration Name)	(Document #)
4.		
(Cor	poration Name)	(Document #)
D	Pick up time	
☐ Mail out	Will wait Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	000000045034
Profit	Amendment	2000020946024
NonProfit	L Resignation of R.A., Officer/D	irector
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
	CAME STATE OF THE PROPERTY OF	
OTHER FILINGS	REGISTRATION/ QUALIFICATION	D ₁
Annual Report	Foreign	SE 97 F
Fictitious Name	Limited Partnership	97 FEB 21 SH 3: 43
Name Reservation	Reinstatement	
	Trademark	Tr teu; B. 350
	Other	33. 4 84. 4
	<u> </u>	J 😀 🚉

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

Heidi M. Kiefer

I. Akidi M. Idiafus , hereby resign as Vice PRESIDENT / Director

of HEAVENY MAIDS INC., # P96,000084387

(Name of Corporation)

a corporation organized under the laws of the State of Klouida

That the corporation has been notified in writing of the resignation.

Signature of resigning officer/director)

FILING FEE IS \$35.00

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