

P96000104105

TRANSMITTAL LETTER

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

200002037692--5  
-12/24/96--01168--014  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: CARE CLEANING, 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

FROM:

Carrie Lauer  
Name (printed or typed)

6243 Grand Cypress Circle  
Address

Lake Worth FL 33463  
City, State & Zip

(561) 965-3072  
Daytime Telephone number

Done  
12/30/96

RECEIVED  
TALLAHASSEE, FLORIDA

95 DEC 23 AM 11:19

FILED

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

## ARTICLES OF INCORPORATION

FILED  
96 DEC 23 AM 11:19  
SEAL  
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: *CARE CLEANING, INC.*

### ARTICLE II PRINCIPAL OFFICE

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

*6243 Grand Cypress Circle  
Lake Worth, FL 33463*

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: *100 shares*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*NANCY WRIGHT, ESQ.  
7274 Michigan Isle Road  
Lake Worth, FL 33467*

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Dennis Lauer  
Currie Lauer

6243 Grand Cypress Circle  
Lake Worth, FL 33463

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

17<sup>th</sup> day of December, 1996.

\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

**FILED**

96 DEC 23 AM 11:19

TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: CARE CLEANING, INC.

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

NANCY WRIGHT, ESQ.  
(Name)

7274 Michigan Isle Rd  
(P.O. Box not acceptable)

Lake Worth, FL 33467  
(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 pro- and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Nancy Wright  
(Signature)

12-17-96  
(Date)