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

300002095783--0 -02/24/97--01112--010 ****131.25 ****131.25

	roposed corporate	name - must include su	ffix)	
Enclosed is an original for: \$70.00 Filing Fee	and one (1) cop \$78.75 Filing Fee & Certificate	y of the articles of \$122.50 Filing Fee & Certified Copy	incorporation and Xi\$131.25 Filing Fee, Certified Copy & Certificate	97 HAR 17
FROM:		StevenP. Cruz Name (printed or typed)		El 8: 14
		i S.E. Indian S	5+.*B-1	Dr.
	<u></u>	Address		
	Stu	Stuart, FL 3499 4		
		City, State & Zip		
	561-	561-223-6373		
	Daytin	Daytime Telephone number		
	FEB 2	2 B36	∆M AR	¹ 7.
	\bigvee	V97-47	27	- ,

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 27, 1997

STEVEN P. CRUZ 2201 S.E. INDIAN STREET #B-1 STUART, FL 34994

SUBJECT: DETAILZ DETAILZ, INC. Ref. Number: W97000004727

We have received your document for DETAILZ DETAILZ, INC. and check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Fiorida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6925.

Brenda Baker Corporate Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Letter Number: 697A00010407

ARTICLES OF INCORPORATION

97 MAR 17 AM 8: 14

TALL A LANGE TO 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:

Detailz-Detailz Coast Line.

ARTICLE II PRINCIPAL OFFICE

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

2201 5.8. Indian 5+. #8-1 Stuart, FL 34994

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Steven P. Cruz 2201 5 & Indian 5 + # 6-1

Stuart, FL 34994

ARTICLE V INCORPORATOR(S)

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

Steven P. Cruz 2201 5 £ Indian 5t #8-1

Stuart, FL 34994

Jannette Cruz 22015 E. Indian St #B-1

Stuart, FL 34994

ince the Course

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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:_	Detailz-Detailz			
	of the Treasure	Coast, Inc.		
2. The name and address of the re	gistered agent and office is	:		
Stever	n P. Cruz			
	(Name)			
2201	S.E. Indian St. #B-1			
(P.O. Box not acceptable)				
Stuar	t, FL 34994/ (City/State/Zip)	- Calling St. Let		
Having been named as registered above stated corporation at the plate the appointment as registered age to comply with the provisions of all mance of my duties, and I am familias registered agent.	7	e of process for the licate, I hereby accept apacity. I further agree oper and complete periorgations of my position		

(Signature)

(Date)