TRANSMITTAL LETTER

Description of the Property of the Control of the Property of the Control of the

SUBJECT:	PERSONAL	TOUCH	CLEANING	SERVICES	OF	TALLAHASSEE	Inc.
	(Proposed corporate name - must include suffix)						

700002307297--1 09/30/97--01005--017 ****131.25 ****131.25

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

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: WENDY E. GRAHAM

Name (Printed or typed)

1241 W. THARPE STREET SUITE NO. 15

Address

Address

City, State & Zip

13.700

1850)86-8970

Daytime Telsphone number

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

ARTICLES OF INCORPORATION The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation. ARTICLE I NAME The name of the corporation shall be: PERSONAL TOUCH CLEANING SERVICES OF TALLAHASSEE ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: IN. THARPE STREET SUITE NO.15 32303 The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000 INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: WENDY E. GRAHAM WITHARPE STREET SwITE No. INCORPORATOR TLH. F. 32363 ARTICLE V The name and address of the incorporator to these Articles of Incorporation are: GRAHAM THARF STREET SUITE NO. 15

(An additional article must be added if an effective date is requested.)

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 proper and complete performance of my duties, and I am familiar with and accept the obligations of my position persistency agent

Signature Hegisteron Agent

PATEMBER BOTH 1997