

P 98 00000 3500

TRANSMITTAL LETTER

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

300002397173--9
-01/12/98--01089--017
*****70.00 *****70.00

2
Subject: Complete Carpet Care, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

X \$70.00
Filing Fee

FROM: Robert F. Langmaack
12125 Glencliff Circle
Tampa , FL 33626
813.855.0439

FILED
98 JAN 12 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Enclosed is a copy of the original and one copy of the articles.

Please also Note I have enclosed an extra copy and a SASE to return the extra copy of the approval to me. Thank you.

F. CHESSER JAN 13 1998

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:

COMPLETE CARPET CLEANING, INC.

ARTICLE II PRINCIPAL OFFICE

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

12125 Glenclyff Circle, Tampa, Florida 33626

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: TEN (10)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Robert F. Langmaack
12125 Glenclyff Circle
Tampa, Florida 33626

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Robert F. Langmaack
12125 Glenclyff Circle
Tampa, Florida 33626

Robert F Langmaack

Signature/Incorporator

1-9-98

Date

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 as registered agent.

Robert F Langmaack

Signature/Registered Agent

1-9-98

Date

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TALLAHASSEE, FLORIDA