

TRANSMITTAL LETTER

P98000072981

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

800002611648--5
-08/10/98--01062--018
*****70.00 *****70.00

SUBJECT: Home Solutions Network, 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

ADDITIONAL COPY REQUIRED

FROM: Pamela Armagost
Name (Printed or typed)

3225 SW 62nd Lane
Address

Gainesville, FL 32608
City, State & Zip

(352) 335-7665
Daytime Telephone number

FILED
98 AUG 20 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. SMITH AUG 20 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 13, 1998

PAMELA ARMAGOST
3225 SW 62ND LN.
GAINESVILLE, FL 32608

SUBJECT: HOME SOLUTIONS OF FLORIDA, INC.
Ref. Number: W98000018491

We have received your document for HOME SOLUTIONS OF FLORIDA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(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 "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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 (850) 487-6927.

Tracy Smith
Document Specialist

Letter Number: 198A00042191

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:

Home Solutions Network, Inc.

Article II **Principal Office**

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

3225 SW 62nd Lane
Gainesville, Florida 32608

Article III **Shares**

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

1000

Article IV **Initial Registered Agent and Street Address**

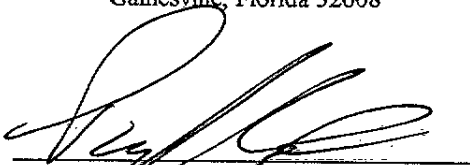
The name and Florida street address of the initial registered agent are:

Pamela Armagost
3225 SW 62nd Lane
Gainesville, Florida 32608

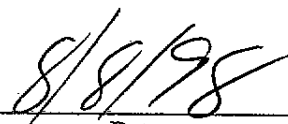
Article V **Incorporator**

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

Pamela Armagost
3225 SW 62nd Lane
Gainesville, Florida 32608



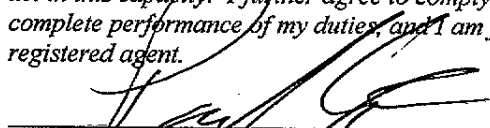
Signature/Incorporator



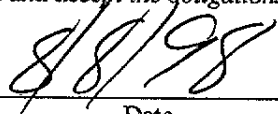
Date

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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.



Signature/Registered Agent



Date