

TRANSMITTAL LETTER

P98000083094

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

SUBJECT: Econo/Wipers of Orlando, Inc.
(Proposed corporate name - must include suffix)

100002648231-4
-09/24/98-01076-001
*****70.00 *****70.00

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: Joni P. Dulany
Name (Printed or typed)

5370 Majestic Island Circle
Address

St. Cloud, FL 34771
City, State & Zip

(407) 957-3582
Daytime Telephone number

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

FILED
98 SEP 24 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TA-9/25/98

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:

Econo/Wipers of Orlando, Inc.

ARTICLE II PRINCIPAL OFFICE

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

6845 Narcoossee Road, Unit 64
Orlando, FL 32822

ARTICLE III SHARES

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

10

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Joni P. Dulany
5370 Majestic Island Circle
St. Cloud, FL 34771

ARTICLE V INCORPORATOR

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

Joni P. Dulany
5370 Majestic Island Circle
St. Cloud, FL 34771

Joni P Dulany
Signature/Incorporator

9-21-98
Date

(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 as registered agent

Joni P Dulany
Signature/Registered Agent

9-21-98
Date

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TALLAHASSEE, FLORIDA