## P9900014490

Form 1

Department of C	of State		-	室		
P.O. Box 632			·	<u> </u>		
Tallahassee, F				-		
SUBJECT:	Detail	Plus of South	west Florida.	<u> </u>	. •	
		(Proposed corporate name	- must include suffix	-N2712/990106U-	5——5 007	
			•	*****70.00 ****	×70.00	
Enclosed is an original and one (1) copy of the articles of incorporation and a check for:						
	<b>≰</b> \$70.00	.\$78.75	□ <sup>2</sup> \$122.50	\$131.25		
Filing Fee		Filing Fee	Filing Fee	F <u>il</u> ing Fee,		
1	imig rec	& Certificate	& Certified Copy	Certified Copy & Certificate		
			ADDITIONAL CO	PY REQUIRED		
V + \-\1						
FROM: Kent Witzel  Name (Printed of typed)						
1914 Marke Rail Head Blvd Address						
Nanles Fl 34110						
	City, State & Zip					
941-596-4220						
Daytime Telephone number						

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

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## ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Detail	1 Plus of Soul	thwest Florida, Inc
2. The principal place of business and mailing ad 1414 Rail Head Blvd Japles, F	dress of the corporation	
3. The corporation shall have the authority to i		shares of stock.
4. The registered agent of the corporation is registered street address is Rail He Florida 34110	dent E. Witzel ad Blud No	and the
5. The initial Board of Directors shall have 2 is/are as follows:  Kent E. Witzel 24712 Lakemont	<u> </u>	
Michael J. Morrison	•	
The number of directors may be raised of corporation but shall in no case be less than on	ie.	nent of the bylaws of the
6. The incorporator of this corporation is _ street address is 24712 Lakewood Cove L	Kent E. Witzel n # C-202 - Bonin	whose  ta Springs Fl  34134
Dated <b>2</b> -9-99		ALLY 99 FEB
	Kutental Incorporator	SSEEFFL.
Having been named as registered agent and to corporation at the place designated in this cert	tificate. I hereby accep	of the appointment as rea
istered agent and agree to act in this capacity of all statutes relating to the proper and comp	. I further agree to co plete performance of r	my duties, and am familiar
with and accept the obligations of my positio	ir as regionered against	
Dated <u>2-9-99</u>	************************************	wa ≟a sa
	Registered Agent	-=-