P 440000 28 642 Department of State

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

Tananassee, 1 D 525 14			
SUBJECT: POLISH EAGLE (Proposed cor	SUPER CLEAN porate name - must include suff	INC	 .
	<u> </u>	0002813 -03/22/330 *****70.00	1113 011
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:			
\$70.00 \$78.75 Filing Fee & Certificate of Status 441-349-1976	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: JAN DOBLOWOLSKÍ Name (Printed or typed) 4232 MADEIRA CT		· - 	
	Address	SECRE SECRE	
SARASOTA, FL Ci 941-342-01	34233 iy, State & Zip 25	MAR 22 PN 3. TRETARY OF STATA AHASSEE, FLORI	

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

Daytime Telephone number

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: EAGLE POLISH ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: COURT MADEIRA 34233 SARASOTA , FL ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: YOLANDA M. CZEPWINSKI LEA PH 4308 MEADOWLAND CIRCLE SARASOTA , FL INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: DOBROWOLSKI 4232 MADEIRA

(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.

Signature/Registered Agent

Signature/Incorporator

SARASOTA , FL

Date