

TRANSMITTAL LETTER

P99000044867

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

500002873885-9
-05/13/99-01067-017
*****78.75 *****78.75

SUBJECT:

PERFECT SOLUTIONS, 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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: MARY SEIDLER
Name (Printed or typed)

80 SW 8TH ST. - STE. 2053
Address

MIAMI, FLORIDA 33130
City, State & Zip

954-584-8917
Daytime Telephone number

FILED
99 MAY 13 AM 8:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

5/18/99
WJW

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:

PERFECT SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

80 SW 8TH STREET
STE. # 2053
MIAMI, FLORIDA 33130

ARTICLE III SHARES

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

ONE THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JAMES REID VANVORIS
680 NE 64 ST. APT. A-305
MIAMI, FL. 33138

ARTICLE V INCORPORATOR

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

MARY SEIDLER
1821 SW 56 AVE.
PLANTATION, FL. 33317

Mary Seidler
Signature/Incorporator

5/10/99
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.

James Reid VanVoris
Signature/Registered Agent

5.10.99
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA