

KLEIN & KLEIN

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May 28, 1999

P99000051362

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

500002891805--5
-06/02/99--01006--012
*****78.75 *****78.75

RE: Complete Home Services of North Central Florida, Inc.

Gentlemen:

Please file the enclosed Articles of Incorporation and send the certified copy and your acknowledgement to me in care of this office. Enclosed is our check in the sum of \$78.75 representing your filing fees.

Very truly yours,


H. RANDOLPH KLEIN

HRK/kp
enc.

FILED
99 JUN -2 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. SMITH JUN 08 1999

ARTICLES OF INCORPORATION
OF
COMPLETE HOME SERVICES OF NORTH CENTRAL FLORIDA, INC.

The undersigned hereby organizes and subscribes to these Articles of Incorporation under the laws of Florida.

I.

The name of the corporation shall be:

COMPLETE HOME SERVICES OF NORTH CENTRAL FLORIDA, INC.

II.

The general purpose for which the corporation is organized shall include the transaction of any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

III.

The aggregate number of shares of capital stock which the corporation shall have authority to issue shall be 1,000 shares of no par value stock, which stock shall qualify under Section 1244, Internal Revenue Service Code.

IV.

The corporation's principal office and registered office shall be:

**10051 N.W. 215 Lane Road
Micanopy, FL 32667**

and the name of its initial Registered Agent at such address shall be:

BLAINE WHITT

V.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The corporation shall have no Directors and the business of the corporation shall be managed by the stockholders.

VI.

The name and address of the incorporator is:

BLAINE WHITT
10051 N.W. 215 Lane Road
Micanopy, FL 32667

IN WITNESS WHEREOF, the incorporator has caused this instrument to be executed this 28 day of May, 1999.



BLAINE WHITT

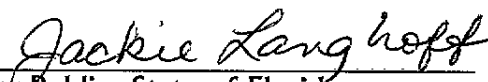
STATE OF FLORIDA

COUNTY OF MARION

Before me, a Notary Public this day personally appeared BLAINE WHITT, who is personally known to me or produced _____ as identification, who executed the foregoing instrument and acknowledged before me the execution thereof for the uses and purposes therein stated and expressed.

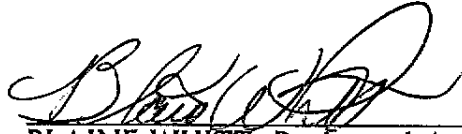
WITNESS my hand and official seal at Ocala, Marion County, Florida, this 28 day of May, 1999.





Notary Public, State of Florida

Having been named Registered Agent of **COMPLETE HOME SERVICES OF NORTH CENTRAL FLORIDA**, I hereby accept said office and agree to comply with the provisions of Chapter 607, Florida Statutes as same pertain to the office of Registered Agent.



BLAINE WHITT, Registered Agent

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99 JUN -2 AM 8:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA