TRANSMITTAL LETTER

Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 32314	9000	0636	44	99 JUL -8 PH 12: 21
SUBJECT: HE	AVEN (name - must include suf	4000029	26674 901087012
Enclosed is an original for: \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	py of the articles of \$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Rosem A Name (Inje Ray (printed or typed) Sw 12 54 Address	nirez rect	
	954-	FL 3. V. State & Zip 927 339 Telephone number	3004	

F. OHRESSEN JUL 1 5 1999

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

HEAVENLY CLEAN COPP.

99 JUL -8 PM 12: 21 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

263 SW 12 Street DANIA FZ 33004

ARTICLE III SHARES

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

ONC

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Rosemarie Raminez 263 SW 12 Street DANIA FL 33004

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Rosemarie Raminez 263. Sw 12 Street Dania FL 33004

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

_____ day of ____ Signature Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	HEAVENLY C	2/68	t <u>N</u> C	<u>Cor</u> F
2. The name and address of the reg	istered agent and office is: MANCE RAMINES	SECHETARY (99 JUL -8 F	Tr
,	(NAME) Swap Street Box of Mail Drop Box NOT ACCEPTABLE)	OF STATE FLORIDA	PM 12: 21	
DANIA	- FL 33004	· ·	-	

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.

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314