

TRANSMITTAL LETTER

P99000097879

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

SUBJECT:

Professional Touch Carpet Care

(Proposed corporate name - must include suffix)

500003037285--3

-11/08/99-01004-001

*****70.00 *****70.00

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:

Robert W. Fakler Jr.

Name (Printed or typed)

2203 Beck Avenue, D-1

Address

Panama City, FL 32405

City, State & Zip

850-769-4461

Daytime Telephone number

RECEIVED
99 NOV -8 AM 7:50
DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
99 NOV -8 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. SMITH NOV 18 1999

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:

Professional Touch Carpet Care, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2203 Beck Avenue, Unit D-1
Panama City, FL 32405

ARTICLE III SHARES

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

10 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

2203 Beck Avenue, Unit D-1
Panama City, FL 32405

ARTICLE V INCORPORATOR

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

Robert Fakler
2203 Beck Avenue, D-1
Panama City, FL 32405

Signature/Incorporator

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

Signature/Registered Agent

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 NOV -8 AM 9:39

FILED

11/5/99

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