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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Don & Julie's Island Cl	eaning Servic	e, Inc.
(PROPOSED CORPORA	ATE NAME – <u>MUST INC</u>	<u>LUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the art	icles of incorporation an	nd a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
	ADDITIONAL	OPT REQUIRED
FROM: Julie L. Hayford	e (Printed or typed)	
16385 Boyce St. Apt 31	0	
Bokeelia, FL 33922	Address State & Zip	······································
(239) 283-2182 / (8 Daytime T	63) 701-3486 Telephone number	
dchayford@gmail.com E-mail address: (to be use	d for future annual report	notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)



ADDIOLES	AFA NOTO		FILED
The name of the corp	VAME Don & Julie's Island (poration shall be:	Cleaning Service, Inc.	11 Ame
			11 SEP 23 4M H: 09
ARTICLE II	PRINCIPAL OFFICE	Mailing	
16	Principal <u>street</u> address 385 Boyce St. Apt 310	Maiing ac	ddress, Schifferent is: IALLAHASSEE, FLORIDA
	keelia FL 33922		TALLAHASSEE, FLORIDA
<u> DU</u>	Reella, FL 55922		
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ARTICLE III P	ich the corporation is organized is:		
Cleaning Servi			
Oleaning Cerv			
450000000000000000000000000000000000000			
The number of share		•	
The number of share	S OI SLOCK IS.TOO		
ARTICLE V 1	NITIAL OFFICERS AND/OR DIRECT	ORS	
Name and Titl	e:Julie L. Hayford, President	Name and Title:	
Address:	16385 Boyce St. Apt 310	Address:	
	Bokeelia, FL 33922		
			
Name and Wide		Name and Title	
Name and 11tt	e:	Address:	<u> </u>
Address:			
			
Name and Title	e:	Name and Title:	
Address:		Address:	
			
ARTICLE VI B	REGISTERED AGENT		
	da street address (P.O. Box NOT acceptable	of the registered agent is:	
Name:	Julie L. Havford	,	
Address:	16385 Boyce St. Apt 310	<u></u>	
	Bokeelia, FL 33922		
40000000000	1200 P.P.O.P. 4 #O.P.		
	NCORPORATOR		
Name:	ess of the Incorporator is: Julie L. Hayford		
Address:	16385 Boyce St. Apt 310	,	
7 1443 4551	Bokeelia, FL 33922		
		i	
	as registered agent to accept service of pro		
this certificate, I am	familiar with and accept the appointment as	registered agent and agree to a	ct in this capacity
	-11 / ///	/	01711
X	Which that		9-17-11
	Required Signature Registered Agent	•	Date
	ent and affirm that the facts stated herein		
wcument to the Dep	artment of State constitutes a third degree fe	iony as proviaea for in s.817.15	J, F.J.
///	1. Juli		9-17-11
X /full	C Description of the second		9-17-11
	Required Signature/Incorporator		Date
	•		