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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORP USA
Account Number : 072450003255
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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DIVISION OF CORPORATIONS
2014 JAN 30 AM 9:49

FLORIDA PROFIT/NON PROFIT CORPORATION
CAPE COD CLEANERS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

69948

RECEIVED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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COVER LETTER

4140000024015

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

SUBJECT: Cape Cod Cleaners, Inc,
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Dennis A Newman CPA
Name (Printed or typed)
2201 NW Corporate Blvd Suite 203
Address
Boca Raton, FL 33431
City, State & Zip
561-809-3773
Daytime Telephone number
GLDE8R@GMAIL.COM
E-mail address: (to be used for future annual report notification)

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

1140000024015

ARTICLE I NAME Cape Cod Services, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

4900 W Atlantic Blvd

Bay #5

Margate FL 33063

Mailing address, if different is:

777 S Federal Highway

Bldg O #277

Pompano Beach, FL 33062

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful purpose

ARTICLE IV SHARES 1,000, one dollar par

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Ravino President

Address: 777 S Federal Highway

Building O #207

Pompano Beach, FL 33062

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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JAN 30 2014
DIVISION OF CORPORATIONS

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Robert Ravino
Address: 777 S Federal Hwy Bldg O #207
Pompano Beach, FL 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert Ravino
Address: 777 S Federal Hwy Bldg O #207
Pompano Beach, FL 33062

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Robert L. Ravino
Required Signature/Registered Agent

1-30-2014
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Robert L. Ravino
Required Signature/Incorporator

1-30-2014
Date