

P 20 000 0 20 406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

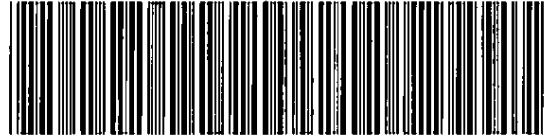
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/18/20--01021--023 ♦♦78.75

COVER LETTER

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

SUBJECT: H & M CLEANING SOLUTIONS, 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 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: MARIA F. OLIVERA
Name (Printed or typed)

350 - 75 Street Apt. 207
Address

Miami Beach FL 33141
City, State & Zip

786 390 3183
Daytime Telephone number

mariaolivera36@hotmail.com
E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE
TALLAHASSEE, FL

2020 FEB 18 PM 4:00

FILED

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: H & M CLEANING SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

350 - 75 Street Apt 207
Miami Beach FL 33141

Mailing address, if different is:

350 - 75 Street Apt 207
Miami Beach FL 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL BUSINESS / ACTIVITY PERMITTED IN THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100 (One hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA F OLIVERA - President Name and Title: _____

Address 350 - 75 Street Apt 207 Address: _____

Miami Beach FL 33141 _____

50% Capital Stock _____

Name and Title: Hebert H. Munoz - V/President Name and Title: _____

Address 350 - 75 Street Apt 207 Address: _____

Miami Beach FL 33141 _____

50% Capital Stock _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
2020 FEB 18 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FL

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: MARIA F OLIVERA

Address: 350 - 75 Street Apt 207

Miami Beach FL 33141

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: MARIA F OLIVERA

Address: 350 - 75 Street Apt 207

Miami Beach FL 33141

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2020 FEB 18 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/13/2020. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

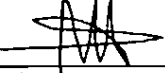
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature/Registered Agent

02/13/2020
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.


Required Signature/Incorporator

02/13/2020
Date