TRANSMITTAL LETTER 1 000002879

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

SUBJECT: C.	CAM. CICANING CORPORA	Services II	NC DESUBERS		· · · · ·
		600003 : -01/02/ ******	518246 /0101064- 37.50 ****	62 	-
Enclosed is an orig	ginal and one(1) copy of the article	s of incorporation and a c	heck for:	•	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified C & Certifica Status	Copy ate of	
FROM	1: <u>Carolyn Carte</u> Name (Pr <u>bb48 Evergree</u>	N Drive		01 JAN -\$ AM IO: 07 SECHETARY OF STATE TALLAHASSEE, FLORIDA	ÄED
	Miramar, FL.	33023			
	City,	State & Zip	·		
	Miramar, FL. City, (954) 438-125	2	•		
Caroly Cart	Daytime Te	elephone number		•	
AUTHORIZATION BY PHON CORRECT OF I-9-01 DOC. EXAM BR	ETO	<i>i.</i> _			-
,		F. CHEES		8 2000	
	NOTE: Please provide the or	iginal and one copy of t	the articles.		

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 6	521, F.S. (Profit)		
ARTICLE I NAME The name of the corporation shall be L.C.M.		rvices I	NC.
•			,
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	6648 Evergi Miramar, Fi	reen Driv 1. 33023	e .
ARTICLE III PURPOSE The purpose for which the corporation is organized.	ed is: To Provid RESIDENCE FOR Prof.	le Comme e Cleanin	ercial and g service.
ARTICLE IV SHARES The number of shares of stock is: 100	+01 P70+.	<i>) 1</i> .	
ARTICLE V INITIAL OFFICERS/DIRECTOR The name(s) and address(es):	TORS (optional)	VAL.	OI JAN -2 AN IO: OT STATE SECRETARY OF STATE
			M IO: 07
ARTICLE VI REGISTERED AGENT			
The name and Florida street address of the register Carolyn Carter blog 8 Evergreen Drive	red agent is:	,	
MIRAMAR, FL 33023 ARTICLE VII INCORPORATOR			
The name and address of the Incorporator is:			
Carolyn Carter			
Miramar, FL 33023		•	
Having been named as registered agent to accept service of p certificate, I am familiar with and accept the appointment as n	**************************************	**************	*****
certificate, I am familiar with and accept the appointment as n	egistered agent and agree to ac	ct in this capacity	aesignated in this
Signatura Maria		- 12/27/07)
A A A A A A A A A A A A A A A A A A A		Date	
Signature/Incorporator	A CONTRACTOR OF STREET	12/27/00 Date	