Pa100003117

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53/q/2

COVER LETTER

	tration Section ion of Corpora							
SUBJECT:	CLEANCO, IN	RC.						
		Name of corporat	ion - must	include suffix				_
Dear Sir or M	ladam:							
"Certificate o	l'Existence," o	y Foreign Corporation f r "Certificate of Good S poration to transact bus	tanding'' a	nd eheck are sul				
Please return	all corresponde	mee concerning this mat	iter to the f	ollowing:				
ELTON RILE	Y							
****		Name	of Person					_
CLEANCO, IN								
		Firm/C	ompany					
1005 8TH AVI						٠ <u>.</u> ٠	707	
		Ad	ldress				<u> </u>	flor
MIDFIELD, A	L 35228						2021 HAY 28	ا المفاوس تلفذ زد
		City/State	e and Zip c	ode				<u>:</u>
eltonvriley@y:						; ;	1	; n
	E	-mail address: (to be use	d for futur	e annual report	notification	n) !!!! =:::::	ب	\ <u>`.</u> -
For further in	formation conc	erning this matter, pleas	se call:				52	
ELTON RILE	Y (owner)	at (205	744-	7191				
Name	e of Person	Area C	ode	Daytime Telep	ohone Num	ber	-	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAIL!NG ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
	eck payable to:	ollowing amount: FLORIDA DEPARTME: \$78.75 Filing Fee & Certificate of Status		NTE Filing Fee & ied Copy		50 Filin tificate o tified Co	of Statu	ıs &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

		20	3100703	ng business in Florida)
- (Slate or country)	2. ALABAMA 3. 20-2198683 (State or country under the law of which it is incorporated) (FEI number.			nalionkla)
JANUARY 5, 200	Ś			
(Date of incorporation)			(Date of duration, if other	than a mark 15
SEPTEMBER 16, 2020			(Date of duration, if other	tnan perpetuat)
	V P	_	treet address)	一刻。
	(Current ma	iling ac	ldress, if different)	2021 HAY 28
Name and street a	ddress of Florida registered agent: (I	P.O. B	ox <u>NOT</u> acceptable)	8 MIO: 53
Name:	BRUCE MARTIN			Ö
fice Address:	8103 HIGHPOINT RD	•		- 15 5 3
nce Audiess.	PANAMA		32404	
1				

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

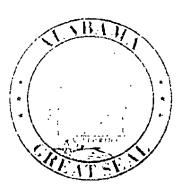
A. DIRECTORS				
### Chairman	Name: Elton Riley	[]Chairman	Name.	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	1005 8th Ave	□Director		
□President	Midfield, AL 35208	□President		
□Vice President		C.Vice President		
□ Secretary	□ Treasurer	□Secretary		Treasurer
NOther MGV	Other	□Other		TOther
∐Chairman	Name:	[]Chairman	Name:	
IlVice Chairman	Address:	LiVice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
TiSecretary	E/Treasurer	TiSceretary		ElTreasurer
ElOther	[]Other	[[Other		_DÖther S
			Name:	TAY 28
[]Chairman	Name:			
	Address:	□Vice Chairman	Address:	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Director		□ Director		<u> </u>
□President		El President	-	
Nice President		□Vice President		
□ Secretary	□ Treasurer	□Secretary		☐ Treasurer
□Other	Other	Other		□Other
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department	nt of State Annual Re	port form.	•
14	Signature of Director of	r Officer		
The officer or direct	ctor signing this document (and who is listed in number alse information submitted in a document to the Departr	· 11 above) affirms th	at the facts stated	herein are true and that he or
13. CLEANCO.	INC. ELTON RILEY (owner)			
٦	(Typed or printed name and capacity of perso	n signing application	J	

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that CLEANCO, Inc. was formed in Jefferson County, Alabama on August 17, 2001. The Alabama Entity Identification number for this entity is 218-368. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210402000006986

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State; at the Capitol, in the city of Montgomery, on this day.

04/02/2021

Date

X 74. Merill

John H. Merrill

Secretary of State



April 24, 2021

ELTON RILEY 1005 8TH AVE MIDFIELD, AL 35228 US

SUBJECT: CLEANCO, INC. Ref. Number: W21000056327

We have received your document for CLEANCO, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$150.00.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call

RECEIVED

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