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## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

#### **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.

Account Number : 104512000707 Phone : (305)266-4080

Fax Number : (305)266-4080

## FLORIDA PROFIT CORPORATION OR P.A.

AAAA SWEEPING SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: AAAA SWEEPING SERVICES, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13700 N.W. 19 AVE. BAY 16 OPA LOCKA, FL. 33054

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated & COMMON SHARES.

#### ARTICLE IV

#### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALVARO SOLANO 13700 N.W. 19 AVE. BAY 16 OPA LOCKA, FL. 33054

Prepared by: ALVARO SOLANO 13700 N.W. 19 AVE. BAY 16 OPA LOCKA, FL. 33054 305 7613626 OO AUG - 1 MM 8: 35
SECRETARY OF STATE
TALLAHASSEE ET BOILA

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ALVARO SOLANO 13700 N.W. 19 AVE. BAY 16 OPA LOCKA, FL. 33054

**DIRECTOR & PRESIDENT** 

ANGELA SOLANO 13700 N.W. 19 AVE. BAY 16 OPA LOCKA, FL. 33054

VICE PRESIDENT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28 day of 07 , 20 00

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: AAAA SWEEPING SERVICES, INC.
- 2. The name and address of the registered agent and office is:

ALVARO SOLANO 13700 N.W. 19 AVE. BAY 16 OPA LOCKA, FL. 33054

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

(DATE)