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LAZARUS CORPORATE	<b>FILING</b>	SERVICE
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(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

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OFFICE USE ONLY

PRPORATION NAME(s) & D	OCUMENT NUMBER(S) (if known):
DANIA CLEA	GNING SERVICES INC.
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
Walk in Pickup time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
. Limited Liability	Change of Registered Agent 50 0
Domestication	Dissolution/Withdrawal
Other	Merger
ÖTTLER FILNGS	REGISTRATION/

QUALIFICATION
Foreign
 Limited Partnership
Reinstatement
Trademark
Other

T BROWN SEP - 6 2000

Examiner's Initials

Annual Report
Fictitious Name

Name Reservation

# ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be: DANIA CLEANING SERVICES INC.

# ARTICLE II PRINCIPAL OFFICE

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

5536 N.W 199 TERRACE MIAMI, FL 33055

# ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any time is:

Ten shares @ \$100.00 par value

# ARTICLE IV INITIAL REGISTERED AGENT

The name and Florida address of the initial registered agent is:

DANIEL ESCOBAR 5536 N.W 199 TERRACE MIAMI, FL 33055

## ARTICLE V INCORPORATOR(S)

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

DANIEL ESCOBAR (President) 5536 N.W 199 TERRACE MIAMI, FL 33055

\$ignature / Incorporator

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.

Signature / Registered Agent

Date/

OOSB 6 PLONE