# P01000 118377 TRANSMITTAL LETTER

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

100004718561--5 -12/11/01--01050--005 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: Michael Angelo's Window Clowning + presure Cleaning + presure

Enclosed is an origina for:	i and one (1) co	py of the articles of	incorporation a	and a che	ck
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	s122.50 Filing Fee & Certified Copy  Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required		
FROM:	Jesan Name	Micheli for (printed or typed)	Michael	Supre	[Z
	3251 5°	Address # 3331	-102	01 DEC 13	SECRETAF TALLAHAS
	954 - 9	y, State & Zip 62 -0242 Telephone number		MH 10: 56	SEE, FLORID,

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

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## ARTICLES OF INCORPORATION

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

#### ARTICLE I NAME

The name of the corporation shall be:

Michael Angelo's Window cleaning + presure cleaning inc.

#### ARTICLE II PRINCIPAL OFFICE

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

3251 SW. 445T # 102 Dania AA. 33312 SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLE III SHARES

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

-one

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Michael Angelo Suprez 3251 sur 44 st #102 Dania fl. 33312

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Michael Angelo Suarez 3257 Sev. 44 ST #2102 DANIA FIA. 33312

Signature

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 607.0501, 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:	Michael Angdos Window + Presure			
		leaning inc			
2.	The name and address of the registered agent and office is:				
	Michael	Angelo Suarez = = ================================			
	<u> </u>	(ST. \$\frac{10\partial}{Aail Drop Box NOT ACCEPTABLE)}  DEC AFRICATION  AND ACCEPTABLE  PER CONTROL OF THE CONT			
	DANIA Alt.	TSTIL 10: 55 TELEVISION TO STATE OF THE STAT			

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) Dec - 8 - 200/ (DATE)