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(Requ	estor's Name)			
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(City/S	State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

Office Use Only





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## TRANSMITTAL LETTER

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

Enclosed are an origina	al and one (1) copy of the artic	les of incorporation and	a cneck for:		
Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of		
FROM:	esus Salazar		1 1 REQUIRED		
Name (Printed or typed)					
200 Pex Ave. #4					
Palm Springs FL 33461 City, State & Zip					
	561) 512 - 5D90 Daytime Te	lephone number			

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



#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE:I NAME

The name of the corporation shall be:

The Power of Brothers Cleaning Carp.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

200 Rex AUR #4 Palm Springs FL. 33461

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To start my own business under a Corporation.

#### ARTICLE IV SHARES

The number of shares of stock is: ONE (See)

#### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Jesus R Salazar 200 Rex Ave Apt #4 Palm Springs, FL 33461 Owner

ARTICLE VI REGISTERED AGENT

Sout Rex Ave Apt #4

Palm Springs, FL 33461 Owner

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Jesus R Salazar 200 Rex Ave Apt #4 Palm Springs, FL 33461

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

12-16-3003 Date