

PA3000001937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

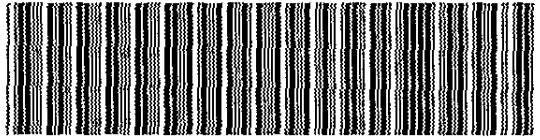
(Business Entity Name)

(Document Number)

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

01/07/03--01034--007 **78.75

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STATE
DIVISION OF CORPORATIONS
03 JAN -7 PM 1:22

1-7-03

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LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. CARLOS PROFESSIONAL CLEANING SERVICES, INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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MAY 10 10 50 AM '03
DIVISION OF REGISTRATION

Walk in

Pick up time

2:00

Certified Copy

Mail out

Will wait

Photocopy

Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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: **CARLOS PROFESSIONAL CLEANING SERVICES, INC.**

ARTICLE II - PRINCIPAL OFFICE:

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

5910 WILEY ST.
HOLLYWOOD, FL. 33023

ARTICLE III - SHARES:

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and address of the initial registered agent is:

CARLOS RAMOS
5910 WILEY ST.
HOLLYWOOD, FL. 33023

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JAN -7 PM 1:22

ARTICLE V - INCORPORATOR(S):

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

CARLOS RAMOS
5910 WILEY ST.
HOLLYWOOD, FL. 33023

ARTICLE VI - DIRECTOR(S):

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


PRESIDENT

Carlos ramos
5910 WILEY ST
HOLLYWOOD, FL. 33023

VICE-PRESIDENT

Sonia Arevalo
5910 WILEY ST..
HOLLYWOOD, FL. 33023

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this ____ day
of _____, 2002.



Sonia AREVALO

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CLERK OF SUPERIOR COURT
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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

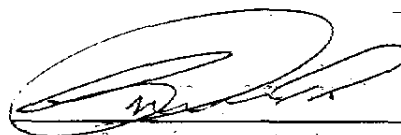
Pursuant to the provisions of sections 607.0501 or 617.0501, Florida statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, In the State of Florida.

1. The name of the corporation is: **CARLOS PROFESSIONAL CLEANING SERVICES, INC.**

2. The name and address of the registered agent and office is:

CARLOS RAMOS
5910 WILEY ST.
HOLLYWOOD, FL. 33023

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 REGISTRERED 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 I FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



DATE: _____