

PC3600000207fh

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

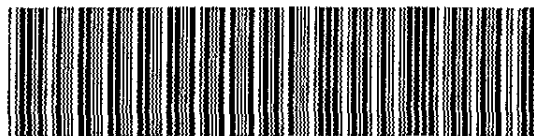
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 JAN -6 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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3/1/07

TRANSMITTAL LETTER

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

SUBJECT: Haley's Cleaning Service Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: _____

Name (Printed or Signed)

LES GARDI, CPA

7061 S. TAMiami TRAIL

SARASOTA, FL 34231-5559

Address
(941) 925-2099

City, State & Zip

Daytime Telephone 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:

Haley's Cleaning Service Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4739 Old Farm Road
Sarasota, FL 34233

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Own and Operate a Cleaning Service

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

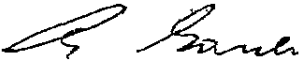
LES GARDI, CPA
7061 S. TAMiami TRAIL
SARASOTA, FL. 34231-5559
(941) 925-2099

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ted Bielowicz
4739 Old Farm Road
Sarasota FL 34233

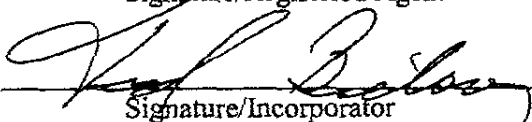
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1/2/03

Date



Signature/Incorporator

1/2/03

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA