P030000(8866

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special instructions to Filing Officer:						
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status						
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)					
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status						
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)					
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	,					
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(CitulState/Tin/Phone #)					
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Otty/Otate/Elph Hone wy					
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL					
(Document Number) Certified Copies Certificates of Status						
Certified Copies Certificates of Status	(Business Entity Name)					
Certified Copies Certificates of Status						
Certified CopiesCertificates of Status	(Document Number)					
	• • • • • • • • • • • • • • • • • • • •					
	Cartificate Conics Continues of Status					
Special Instructions to Filing Officer:	Certified Copies Certificates of Status					
Special Instructions to Filing Officer:						
	Special Instructions to Filing Officer:					



400011998234

02/12/03--01031--006 **78.75

OSFEBIZ AMIC: 39
SECRETIONS SECRE

Office Use Only

TRANSMITTAL LETTER

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

	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the art	ticles of incorporation and	d a check for:	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL COPY REQUIRED		
FROM:	Joselin Ger	7a Q e (Printed or typed)		
	2330 welling	_	Dr. #207	
City, State & Zip				
	(561) 719-300 Daytime	7 Telephone number		

SUBJECT: J'S Cleaning Services INC.

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

The name of the corporation shall be: J's Cleaning Services, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 2330 Wellington Green Dr. #207

Wellington, Fl. 33414

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Residental & Commercial Cleaning Service

ARTICLE IV SHARES

The number of shares of stock is:

1,500 Common Shares

INITIAL OFFICERS/DIRECTORS (optional) ARTICLE V

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

Joselin Genao

2330 Wellington Green Dr. # 207

Wellington, Fl. 33414

REGISTERED AGENT ARTICLE VI

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

Joselin Genao

2330 Wellington Green Dr. # 207

Wellington, Fl. 33414 ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joselin Genao

2330 Wellington Green Dr. # 207

Wellington, Fl. 33414

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