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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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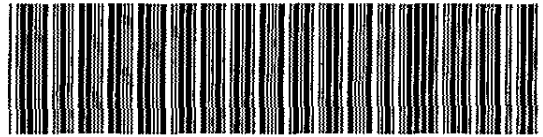
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN -5 PM 12:21

1-13-04

TRANSMITTAL LETTER

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

SUBJECT: Mop and Rail Professional Cleaning Services, 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: Rosanne Morelli
Name (Printed or typed)

1302 SE Carrington Ct.
Address

Port St. Lucie, FL 34952
City, State & Zip

772-335-2679
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:

Mop & Pail Professional Cleaning Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1302 SE Carrington Ct.
Port St. Lucie, FL 34952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Commercial Cleaning Services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Rosanne Morelli - Vice President
Anthony Bruno - President

ARTICLE VI REGISTERED AGENT

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

Rosanne Morelli;
1302 SE Carrington Ct.
Port St. Lucie, FL 34952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rosanne Morelli
1302 SE Carrington Ct.
Port St. Lucie, FL 34952

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

Rosanne Morelli
Signature/Registered Agent

1/2/04
Date

Rosanne Morelli
Signature/Incorporator

1/2/04
Date

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