

P0400032273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

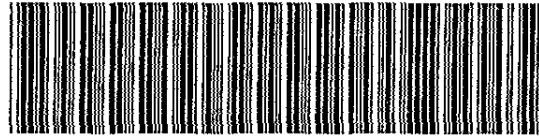
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: TRI-COUNTY 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: DANIEL PERALTA
Name (Printed or typed)

1275 SW 46TH AVE APT. 2116
Address

POMPANO BEACH FL. 33069
City, State & Zip

954-553-1348
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:

TRI-COUNTY CLEANING SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1275 SW 46TH AVE APT. 2116
POMPANO BEACH FL. 33069

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE CLEANING SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100 DANIEL PERALTA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DANIEL PERALTA - PRESIDENT
1275 SW 46TH AVE APT. 2116
POMPANO BEACH FL. 33069

ARTICLE VI REGISTERED AGENT

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

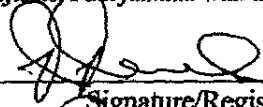
DANIEL PERALTA
1275 SW 46TH AVE APT. 2116
POMPANO BEACH FL. 33069

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DANIEL PERALTA
1275 SW 46TH AVE APT. 2116
POMPANO BEACH FL. 33069

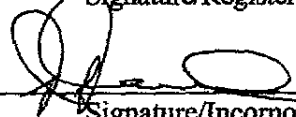
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

02-13-04

Date



Signature/Incorporator

02-13-04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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