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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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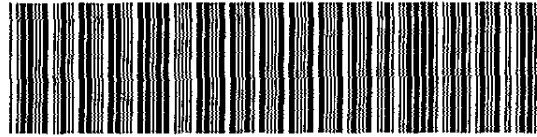
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
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TRANSMITTAL LETTER

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

SUBJECT: Cleobiz, 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: Claudia Andrea Quintero

Name (Printed or typed)

11438 NW 62nd Terrace #219

Address

Miami, FL, 33178-2887

City, State & Zip

(305) 323-8734

Daytime Telephone number

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TALLAHASSEE, FLORIDA

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:

Cleobiz, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11438 NW 62nd Terrace #219
Miami, FL, 33178-2887

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any activity or business permitted under de laws of the United States and the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

One Thousand (1,000) shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Claudia Andrea Quintero – Director-President/Secretary/Treasurer
11438 NW 62nd Terrace #219
Miami, FL, 33178-2887

ARTICLE VI REGISTERED AGENT

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

Claudia Andrea Quintero
11438 NW 62nd Terrace #219
Miami, FL, 33178-2887

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Claudia Andrea Quintero
11438 NW 62nd Terrace #219
Miami, FL, 33178-2887

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 familliar with and accept the appointment as registered agent and agree to act in this capacity

Claudia A. Quintero.P.

Signature/Registered Agent

March 15th, 2004

Date

Claudia A. Quintero.P.

Signature/Incorporator

March 15th, 2004

Date

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