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SECRETARY OF SHALE DIVISION OF STATE

OR alas

TRANSMITTAL LETTER

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

SUBJECT: Yanay Cleaning Services, Inc.				
	/ (Proposed corpor	ate name - must include sui	mx)	
Enclosed is an origin	al and one(1) copy of the articles	of incorporation and a	check for:	
□ \$70.00	□ \$78.75	⊠ \$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
_	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
	PY REQUIRED			
	, ,			
FROM:	FROM: RAMON Reves Name (Printed or typed)			
Name (Frinted or typed)				
5075 O.L. A.				
5035 PAIM Ave Address				
Higleah, FL 33012				
City, State & Zip				
(305) 822 - 0669 Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

YANAY CLEANING SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5615 CT E SUITE 106 ELLENTON FL 34222

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000 Common Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MARTHA TEJEDA 5615 CT E SUITE 106 ELLENTON FL 342222

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

PRESIDENT:

MARTHA TEJEDA

5615 CT E SUITE 106 ELLENTON FL 34222

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date