

PD5000037645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

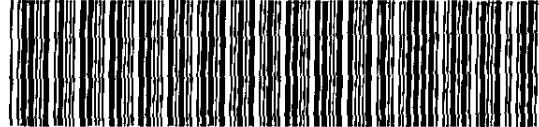
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEU ETATY OF STATE
TALLAHASSEE, FLORIDA

QMD 3/11/05

TRANSMITTAL LETTER

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

SUBJECT:

SUPER LOOTE DRY-CLEANER
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) INC

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:

WILNICK ST Clermont
Name (Printed or typed)

2780 NE 183 STREET #1603
Address

AVENTURA FL 33160
City, State & Zip

(305) 756-2674 OR (305) 807-7622
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:

SUPER LOOK DRY-CLEANER INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

302 NE 79 Street
MIAMI, FL 33138

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DRY-CLEANER and LAUNDRY SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WILNICK ST CLERMONT
2780 NE 183 ST # 1603
AVENTURA, FL 33160 (OWNER)

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

WILNICK ST CLERMONT
2780 NE 183 ST # 1603
AVENTURA, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILNICK ST CLERMONT
2780 NE 183 ST # 1603 AVENTURA, FL 33160

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

WILNICK ST CLERMONT
Signature/Registered Agent

2-28-05
Date

WILNICK ST CLERMONT
Signature/Incorporator

2-28-05
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA