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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer;	

Office Use Only



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TRANSMITTAL LETTER

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

SUBJECT:	CEC RESIDEN (PROPOSED CORPORA	TIAL CLEANING TENAME-MUSTINCLE	G SERVICES C UDESUFFIX)	ORPORACION
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:	
\$70.00 Filing Fee	Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	CHRISNEL LA	MRENT (Printed or typed)		
	6655 CHAN	TRY STREE	<u></u>	
	ORLANDO City,	Florisa State & Zip	32835	-· · · - ·····
	(407) 79 Daytime T	7 - 9 822 clephone 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)	05 APR	LED
ARTICLE I NAME The name of the corporation shall be: CEC RESIDENTIAL CL	-	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	PH 3:03
CEC RESIDENTIAL CL	EANING SERVICE	ES CORPORT	TUSH.
The principal place of business/mailing address is:			
ORLANDO FLORIDA 3283.		· · · · · · · · · · · · · · · · · · ·	
The purpose for which the corporation is organized i		•	
ANY AND ALL LAWFUL BUSIN	1855		
ARTICLE IV SHARES The number of shares of stock is:	·		<u> </u>
100 ShARES			
ARTICLE V INITIAL OFFICERS AND/OF List name(s), address(es) and specific title(s):	DIRECTORS		
CHERLA LAURENT, PRESIDENT & S 6655 CHANTRY STREET OCLANIO,	FLORETARY FLOREDA 32835		
CHRISNEL LAURENT, VICE PRESI 6655 CHANTRY STREET ORLAND ARTICLE VI REGISTERED AGENT	DENT & TREASURER	2	
The name and Florida street address (P.O. Box NO)	racceptable) of the register	red agent is:	
CHRISNEL LAURENT 6655 CHANTRY STREET			
ORLANDO, FLORIDH 32835	• •		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	A Section of the sect		
CHRISNEL LAURENT - 66 NJ CHANTRY STREET ORLANDO Florida 32835	44 - 2 1 - 2 1 - 1		See .
**************************************	*******	******	****
Having been named as registered agent to accept service of proceedificate, I am familiar with and accept the appointment as region of the service of proceedings and accept the appointment as regions.			ignated in this
Signature/Registered Agent		Date	
Signature/Incorporator	. , . , . ,	4/18/200 Date	<u>21</u>
Signature/ nicor porator		Dun	