# P05000098940

| (Requestor's Name)                      |
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| (Address)                               |
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| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

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# TRANSMITTAL LETTER

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

|                         | (PROPOSED CORPORA                            | TE NAME – <u>MUST INCL</u>            | UDE SUFFIX)                              |
|-------------------------|--|---------------------------------------|--|
| sed are an orig         | inal and one (1) copy of the arti            | icles of incorporation and            | l a check for:                           |
| ☐ \$70.00<br>Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | ☐ \$78.75 Filing Fee & Certified Copy | \$87.50<br>Filing Fee,<br>Certified Copy |
|                         |  | ADDITIONAL CO                         | & Certificate of Status  PPY REQUIRED    |
| FROM: Re                | v.C. Heffron                                 |                                       |  |
| PROM: 10                | Name   | (Printed or typed)                    | <u> </u>                                 |
|                         | 123 Sky High Dune Drive                      | Address                               |  |
|                         |  | Address                               |  |
| 2                       | Santa Rosa Beach, Fl 32459  City.            | State & Zip                           | · · · · · · · · · · · · · · · · · · ·    |
|                         | ,  |                                       |  |
|                         | 350-622-0722                                 |                                       |  |

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



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 6, 2005

RAY C HEFFRON 123 SKY HIGH DUNE DR SANTA ROSA BEACH, FL 32459

SUBJECT: GI CLEANING CORPORATION

Ref. Number: W05000032442

We have received your document for GI CLEANING CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

# Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P03000023156 (G.I. CLEANING CO).

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 105A00044835

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

### ARTICLE I NAME

The name of the corporation shall be:

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GI Cleaning Corporation of North Florida

SECRETARY OF STATE TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 166 Monarch Drive Santa Rosa Beach, FL 32459

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Provide Residential Cleaning Services

### ARTICLE IV SHARES

The number of shares of stock is: 200

### ARTICLE V **INITIAL OFFICERS AND/OR DIRECTORS**

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

Gabriele M Heffron/President 123 Sky High Dune Drive Santa Rosa Beach, FL 32459 Salvatorica Lacy/Vice President 166 Monarch Drive Santa Rosa Beach, FL 32459

### ARTICLE VI REGISTERED AGENT

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

Ray C. Heffron 123 Sky High Dune Drive Santa Rosa Beach, FL 32459

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ray C. Heffron 123 Sky High Dune Drive Santa Rosa Beach, FL 32459

| **************   | *************   |
|--|---|
| Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered of | r the above stated corporation at the place designated in this<br>agent and agree to act in this capacity |
| Signature Registered Agent   |   |
| CHALLE REGISTER RECIT  | 7-13-05   |
| Signature/Incorporator   | Date  |