P06000008915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

800063635608

01/17/06--01016--005 **78.75

FILED
2006 JAN 17 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Polished Perfection Cleaning Services 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: Georgette L. Simmons
Name (Printed or typed)

1857 Tigerwood Ct.
Address

Orlando, FL 32818
City, State & Zip

321-363-8484
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)

FILED
2006 JAN 17 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:
Polished Perfection Cleaning Services INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
1857 Tigerwood Ct. Orlando, Fl 32818

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Cleaning (Services)

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
Georgette Simmons 1857 Tigerwood ct. Orlando, Fl 32818 Direct
Juanita Jackson 909 Sunniland Dr. orlando, Fl 32808 Secretar

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:
Georgette Simmons
1857 Tigerwood ct.
Orlando, Fl 32818

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:
Georgette Simmons
1857 Tigerwood ct
Orlando, Fl 32818

****

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

Georgette Simmons — 1/12/06
Signature/Registered Agent — Date

Georgette Simmons — 1/ 1 06
Signature/Incorporator — Date

Georgette Simmons