P06000014581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

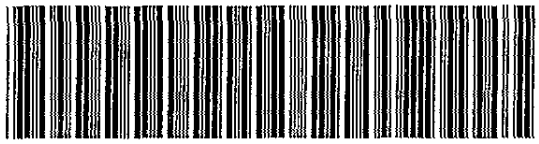
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

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

SUBJECT: The Cleaning Experts of Florida, 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: Karen D. Potts
Name (Printed or typed)

409 N.E. 11th Ave.
Address

Boynton Beach, FL 33435
City, State & Zip

(561) 740-9123
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 26 P 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

The Cleaning Experts of Florida, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

409 N.E. 11th AVE
Boynton Beach, Fl 33435

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

for business

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Karen D. Potts
409 N.E. 11th AVE
Boynton Bch, Fl 33435

ARTICLE VI REGISTERED AGENT

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

Karen D. Potts
409 N.E. 11th AVE
Boynton Bch, Fl 33435

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Karen D. Potts
409 N.E. 11th AVE.
Boynton Bch, Fl 33435

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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

Karen D. Potts — Signature/Registered Agent — 1/23/06 — Date

Karen D. Potts — Signature/Incorporator — 1/23/06 — Date