

P06000015953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

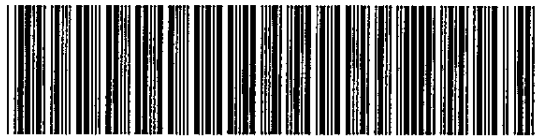
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: PERSONAL RESIDENCE CLEANING CORP.
(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: MARIA D. OLIART
Name (Printed or typed)

7595 BAYMEADOWS CIRCLE W, APT 2507
Address

JACKSONVILLE, FLORIDA, 32256
City, State & Zip

(904) 636 8813
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:

PERSONAL RESIDENCE CLEANING CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7595 BAYMEADOWS CIRCLE WEST APT 2507
JACKSONVILLE, FL 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESIDENCE CLEANING, OFFICE CLEANING, HANDYMAN, PAINTING, MINOR REPAIRS.

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):

MARIA D. OLIART
7595 BAYMEADOWS CIRCLE WEST, APT 2507
JACKSONVILLE, FL 32256
PRESIDENT

ARTICLE VI REGISTERED AGENT

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


MARIA D. OLIART
7595 BAYMEADOWS CIRCLE WEST, APT 2507
JACKSONVILLE, FL 32256
REGISTERED AGENT

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

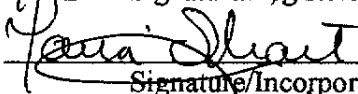
MARIA D. OLIART
7595 BAYMEADOWS CIRCLE WEST, APT 2507
JACKSONVILLE, FL 32256
INCORPORATOR

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

 MARIA D. OLIART
Signature/Registered Agent

01/24/2006

Date

 MARIA D. OLIART
Signature/Incorporator

01/24/2006

Date

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