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## **COVER LETTER**

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

SUBJECT:	HY HICH	1111	NIN IN	Υ.,
	(PROPOSED	CURPURA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy	y of the arti	cles of incorporation and	l a check for:
<b>\$70.00</b>	\$78.75		\$78.75	\$87.50
Filing Fee	Filing Fee & Certificate of S	tatus	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of
			ADDITIONAL CO	Status
FROM:	ROBERT	Bo	(Printed or typed)	
	8710 V		• • •	GIS # 3A I
	TAMPA	FLC	NATOR 33U	45
		City,	State & Zip	
	813-818-01	<b>B4</b> Daytime 1	194-316-	<u> [88] </u>

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
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: BAY ARTICLE I LEADING FILED  ARTICLE I PRINCIPAL OFFICE  ARTICLE II PRINCIPAL OFFICE
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is: 8710 WEST HIUSBOROWH AVE
TAMPA, FL. 33615 #2
ARTICLE III PURPOSE
The purpose for which the corporation is organized is: TESTOENTIAL AND TRUSTICAL
CLEANING
The number of shares of stock is:
The hamber of shader is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
list name(s) address(es) and specific title(s).
ROBERT BOURN (EO
8710 WEST HELLSBOROUGH AVE, # 262
TAMPA, FL. 33615
ARTICLE VI REGISTERED AGENT
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:
ROBERT (SOCAN)
8710 WEST HEUSBOROUGH AE # 262
ARTICLE VII INCORPORATOR TAMPA, FL 33415
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:
ROBERT BOUAN 8710 NEST HEUSBORDUCH AVE. # 262 TAMPA FU 33615
TAMBA FL 33415
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
Wah 1 100 1000 9/17/26
Medic Million William Control
Signature/Registered Agent /Date /
Signaturally of The Signaturally of The Signaturally of The Signaturally of The Signatural Signatura Signatural Signatural Signatural Signatural Signatural Signatura Signatural Signatura Signatu
Signature/Incorporator Date