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SECRETARY OF STATE

C.J. 12-20

COVER LETTER

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

SUBJECT: K	ONY KLEEN INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the arti	icles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:	PABLO JOSE RAMIR	EZ (Printed or typed)	
	7692 WEST 29 LANE	E # 202 Address	···
	HIALEAH, FLORIDA	33018 , State & Zip	
	(786) 486 2295 ; (30	95) 825 5651	

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:

KHONY KLEEN INC.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7692 West 29 Lane # 202 Hialeah, Florida 33018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Janitorial Services

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Pablo Jose Ramirez 7692 West 29 Lane # 202 Hialeah, Florida 33018 (President)

ARTICLE VI REGISTERED AGENT

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

Pablo Jose Ramirez 7692 West 29 Lane # 202 Hialeah, Florida 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pablo Jose Ramirez 7692 West 29 Lane # 202 Hialeah, Florida 33018

Having been named as registered agent to accept/service of process for the above certificate, I am familiar with and append the appointment as registered agent an	ove stated corporation at the place designated in this d agree to act in this capacity
$M_{\rm b} M_{\rm b} M_{\rm b}$	December 17, 2006
Signature/Registered Agent	Date
1. 1804	December 17, 2006
Signature/Incorporator	Date