

P07000011174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

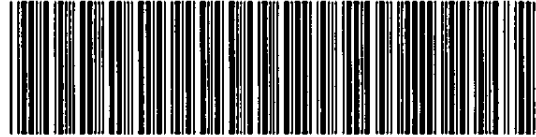
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CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Shine Cleaning Service, 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: Jody Baras

Name (Printed or typed)

18110 Sullivan Ave

Address

Port Charlotte FL 33954

City, State & Zip

1-941-628-6530

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:

Shine Cleaning Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

18110 Sullivan Ave
Port Charlotte, FL 33954

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage in any lawful business that may be engaged in by a corporation organized under as such activities determined by the corporation.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares at 25.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jody L Baras
18110 Sullivan Ave
Port Charlotte, FL 33954

ARTICLE VI REGISTERED AGENT

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

Jody L Baras
18110 Sullivan Ave
Port Charlotte, FL 33954

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jody L Baras
18110 Sullivan Ave
Port Charlotte, FL 33954

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

Jody L. Baras
Signature/Registered Agent

1-19-07
Date

Jody L. Baras
Signature/Incorporator

1-19-07
Date

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07 JAN 24 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA