

PO 1000044140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Palm Coast Valet & Cleaning Services, 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: Kimberly Genovese
Name (Printed or typed)

6013 10th AVE North #205
Address

Greengroves, FL 33463
City, State & Zip

561-968-0574
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:

Palm Coast Valet & Cleaning Services, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O Box 541811

Greenacres, FL. 33454

will not accepted mail at this address until corporate papers and FEIN nuber secured please send papers to: 7803 Haffy Circle Lakeworth, FL 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Valet and cleaning Services

ARTICLE IV SHARES

The number of shares of stock is:

100

Each officers getting 33 1/3 % stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President - Kimberly Genovese - 6013 10th Ave N #205, Greenacres, FL. 33463
V.P. - Jose Almeida, Jr - " " Same as above
Tres. - Walter Kaden - 7803 Haffy Circle, Lakeworth, FL. 33467

ARTICLE VI REGISTERED AGENT

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


Morton Amster, CPA
10058 Spanish Isles Blvd, Suite F7
Boca Raton, FL. 33498

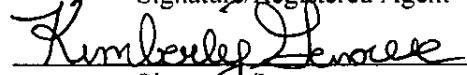
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kimberly Genovese
6013 10th Ave N #205
Greenacres, FL 33463

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



Signature/Registered Agent


Signature/Incorporator

4/1/07

Date
4/5/07

Date