PA7880046375

| (Requestor's Name) | _ | |
|-----------------------------------------|---|--|
| (Address) | _ | |
| (Address) | _ | |
| (City/State/Zip/Phone #) | _ | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | _ | |
| (Document Number) | | |
| Certified Copies Certificates of Status | _ | |
| Special Instructions to Filing Officer: | | |
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| | | |

Office Use Only



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AHASSEE, ELORIDA

COVER LETTER

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

SUBJECT: Guardian Angel Janiforia 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

□ \$78.75

Filing Fee

Filing Fee

& Certificate of Status

□ \$78.75

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

45 Sumpter Ridge Dr.

Address

Midway FL. 32343

(850) 219 - 9179

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: | TAIC. |
| The name of the corporation shall be: Guardian Angel Janiforal Services | 1110 |
| ARTICLE II PRINCIPAL OFFICE | |
| The principal place of business/mailing address is: | |
| 45 Sumpter Ridge Dr. Midway, FL. 32343 | morel |
| ARTICLE III PURPOSE | - Ace o |
| The purpose for which the corporation is organized is: | C A |
| Janitoral | APR 16 CRETARY |
| | SS 16 |
| ARTICLE IV SHARES | E P |
| The number of shares of stock is: | F 3 3 |
| The number of shares of stock is. | SEE.FLORIDA |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS | > |
| List name(s), address(es) and specific title(s): | |
| | |
| 17 Golden Dellas De | |
| 45 Jumpter Rage Dr | |
| Angela Tucker 45 Sumpter Ridge Dr Midway, FL. 32343 | |
| ARTICLE VI REGISTERED AGENT | , |
| The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered ag | gent is: |
| Angela Tucker | |
| 45 Sumpter Ridge Dr. Midway FL | 32343 |
| ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: | |
| Angela Tucker | |
| 45 Sumpter Ridge Dr. Midway, FL | 32343 |
| ******************* | |
| Having been named as registered agent to accept service of process for the above stated corporation of certificate, I am familiar with and accept the appointment as registered agent and agree to act in this continuous co | |
| Amarle Tucker 4 | -16-07 |
| Signature/Registered Agent | -16-07 Date |
| | -16-07 |
| Signature/Incorporator | Date |