

P07000068162

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☐ PICK-UP

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(Business Entity Name)

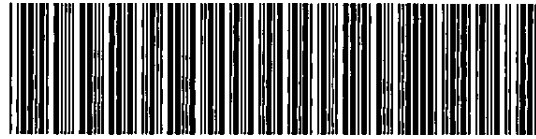
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2007 JUN 11 PM 12:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch JUN 12 2007

## COVER LETTER

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

SUBJECT: ANDREA HANDYMAN 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: IVONNE GARCIA

Name (Printed or typed)

6705 MAGNOLIA POINTE CIRCLE

Address

ORLANDO, FL 32810

City, State & Zip

407-583-7663

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 23, 2007

IVONNE GARCIA  
6705 MAGNOLIA POINTE CIRCLE  
ORLANDO, FL 32801

SUBJECT: ANDREAS SERVICES, INC.  
Ref. Number: W07000024827

We have received your document for ANDREAS SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch  
Document Specialist  
New Filing Section

Letter Number: 507A00035834

FILED  
2007 JUN 11 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

ANDREA HANDYMAN SERVICES, INC

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

6705 MAGNOLIA POINTE CIRCLE, ORLANDO, FL 32810

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROVIDE CLEANING, PAINTING, REMODELING AND RELATED SERVICES

### **ARTICLE IV SHARES**

The number of shares of stock is:

ONE HUNDRED (100) SHARES

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

IVONNE ANDREA GARCIA DAVILA - PRESIDENT

### **ARTICLE VI REGISTERED AGENT**

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

IVONNE GARCIA  
6705 MAGNOLIA POINTE CIRCLE  
ORLANDO, FL 32810

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

IVONNE GARCIA  
6705 MAGNOLIA POINTE CIRCLE  
ORLANDO, FL 32810

\*\*\*\*\*

*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

06/05/2007

Date



Signature/Incorporator

06/05/2007

Date