# Panadolla

(Re	equestor's Name)		
(Ac	ddress)		
(Ac	ddress)		
(Ci	ty/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Ви	usiness Entity Name)		
(Do	ocument Number)		
Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		
Office Use Only			



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## **COVER LETTER**

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

SUBJECT: Yami	let Cleaning Services I	NC TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orio	ginal and one (1) copy of the arti	cles of incompration and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: Y	amilet Torres	(Printed or typed)	
	8415 lincoln cove dr, a	pt 102A Address	
	Tampa,florida 33614	State & Zip	
	813 802-3610	alanhana numbar	

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:

# Yamilet Cleaning Services Inc

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8415 Lincoln cove dr, apt 102A Tampa,Fl.33614

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Cleaning Services

#### ARTICLE IV SHARES

The number of shares of stock is:

100

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

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

Yamilet Torres 8415 Lincoln cove dr apt 102A Tampa,Fl 33614 President OB JAN 17 -PM 1:58
SEURETARY OF STATE

# ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Yamilet Torres

8415 Lincoln cove dr ,apt 102A Tampa,FI 33614

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Yamilet Torres 8415 Lincoln cove dr Tampa,Fl 33614

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

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