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SECRETARY OF STATE  
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24

## COVER LETTER

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

**SUBJECT:** Lee's 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:** Michele Okie

Name (Printed or typed)

4865 Wild Heron Way

Address

Jacksonville, FL 32225

City, State & Zip

904-451-1258

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:

Lee's Cleaning Services, Inc.

### **ARTICLE II      PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

4865 Wild Heron Way  
Jacksonville, FL 32225

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Residential and Commercial 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):

Michele Okie  
4865 Wild Heron Way  
Jacksonville, FL 32225  
President, Vice President, Secretary, Treasurer, Director

### **ARTICLE VI      REGISTERED AGENT**

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

Michele Okie  
4865 Wild Heron Way  
Jacksonville, FL 32225

### **ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

Michele Okie  
4865 Wild Heron Way  
Jacksonville, FL 32225

\*\*\*\*\*

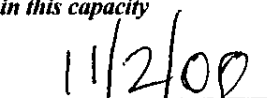
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



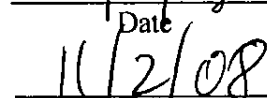
Signature/Registered Agent



Signature/Incorporator



Date



Date

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