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Certified Copies	Certificates of Status				
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Special Instructions	s to Filing Officer:				
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SECRETARY OF STATE

T. Burch MAY 4 2009,

# **COVER LETTER**

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

BJECT: Statew	ide Cleaning & Maintenance, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	UDE SUFFIX)
closed are an orig	rinal and one (1) copy of the arti	cles of incorporation and	l a check for:
✓ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: S	andra Stachurski		
	Name	(Printed or typed)	
	10338 Carlson Circle	Address	· · · · · · · · · · · · · · · · · · ·
	Clermont, FL 34711	State & Zip	
	352-432-3881		<del> </del>
	Doubling T	elenhone number	

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

# FILED

### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2809 HAY -1 PH 4: 46

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Date

#### ARTICLE I NAME

The name of the corporation shall be:

Statewide Cleaning & Maintenance, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

10338 Carlson Circle Clermont, FL 34711

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activity within the purposes for which corporations may be formed under the Business Corporation Act of Florida

#### ARTICLE IV SHARES

The number of shares of stock is: 60,000 shares

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sandra Stachurski

President

10338 Carlson Circle Clermont, FL 34711

## ARTICLE VI REGISTERED AGENT

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

Sandra Stachurski 10338 Carlson Circle Clermont, FL 34711

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Sandra Stachurski

Signature/Incorporator

10338 Carlson Circle Clermont, FL 34711

*********************	********
Having been named as registered agent to accept service of process for the abo certificate, I am familiar with and accept the appointment as registered agent and	
Sandia Stachoshe	4.28.09
Signature/Registered Agent	Date
Sandra Stachuske	4.28.09