P10000088447

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certificates of Status
Special Instructions to Filing Officer:
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DESCRIPTION OF STATE

DIVISION OF SPACE

DALL AMASSEE, FLORIDA

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7. Stylvera MOA 0 J SULLY

11/01/10 To whom H may Concern; Dobbins; (an the owner of Eddy) International Fashions & Ezinne Cleaning Services. The purpose of this letter is to Certify that! ull never restate my old Cooperation Signed Edoth Apwaha 11/01/10

COVER LETTER

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

SUBJECT: Eddy Tryternational Fashions & Ezini Cleaning Services Inc.	1			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
FROM: Edith Major Dobbins Name (Printed or typed) 2014A South Adams Street Address				
Laborhassee Florida 32307 City, State & Zip				
City, State & Zip State & Zip Daytime Telephone number				
edithermala a Jahor Comis E-mail address: (to be used for future annual report notification)				

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

	TCLES OF INCORPORATION h Chapter 607 and/or Chapter 621, F.S. (P	rofit) Fashians
ARTICLE I NAME The name of the corporation shall be:	Internationer	1 Sences S
ARTICLE II PRINCIPAL OFFICE	the Cleaning.	sences his
2014 A South Tallance SSC	A A-down To	g address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized.	ed is:	
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND		
Name and Title:	Address:	
Name and Title:	Name and Title:	
Address:	Address:	
Name and Title: Address:	Address:	
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box N		
Name: Edith Doi Address: Zulyas. Tallahassee F	Adam (5+ 1 32367	
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is: Name: £d. H. De	lking .	3 8 8
Name: £d. th Ve Address: Same Tallahass	1 20 14 A 12367 See, F1 72367	,754
Having been named as registered agent to accept this certificate, I am familiar with and accept the a	service of process for the above stated co	
Required Signature/Reg	Dobbnis	11/01/(0
I submit this document and affirm that the facts document to the Department of State constitutes a	stated herein are true. I am aware that t	
Edith Navaba	Dobans	11/01/10