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(Business Entity Name)

(Document Number)

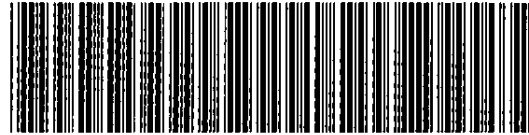
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STATE  
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1 Burch JAN 5 2011

## COVER LETTER

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

SUBJECT: MSI CLEANING 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: MARINAIGNERI  
Name (Printed or typed)

6083 SEMINOLE GARDENS  
Address

PALM BEACH GARDENS, FL 33418  
City, State & Zip

561-691-4827  
Daytime Telephone number

MSICLEANER@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

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



RECEIVED

11 JAN -4 AM 11:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 21, 2010

MARINA IGNERI  
6083 SEMINOLE GARDENS  
PALM BEACH GARDENS, FL 33418

SUBJECT: MSICLEANING INC.  
Ref. Number: W10000058739

We have received your document for MSICLEANING INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

An effective date may be added to the Articles of Incorporation if a 2011 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the corrected 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  
Regulatory Specialist II  
New Filing Section

Letter Number: 510A00029475

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME** MSICLEANING INC.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

6083 SEMINOLE GARDENS  
PALM BEACH GARDENS, FL  
33418

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

OFFICE CLEANING

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: MARINAIGNERI PRESIDENT  
Address: 6083 SEMINOLE GARDENS  
PALM BEACH GARDENS, FL  
33418

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: MARINAIGNERI  
Address: 6083 SEMINOLE GARDENS  
PALM BEACH GARDENS, FL 33418

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MARINAIGNERI  
Address: 6083 SEMINOLE GARDENS  
PALM BEACH GARDENS, FL 33418

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



Required Signature/Registered Agent

12/10/2010

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

12/10/2010

Date

FILED

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STATE OF FLORIDA  
DEPARTMENT OF STATE