P110000015507

(Re	questor's Name)	•		
(Ad	dress)			
(Address)				
(Cit	y/State/Zip/Phon	_ e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
Office Use Only				



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01/21/11--01023--006 **78.75

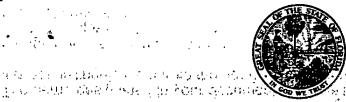
W1-4598

COVER LETTER

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

SUBJECT: STEAM-PRO CORP.				
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the artic	cles 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: NORA E. FABRICIO	(Printed or typed)			
14267 SW 62 ST				
Address				
MIAMI, FL. 33183	State & Zip			
786-399-1217				
Daytime Te	elephone number			
steampro305@yahoo.co	M I for future annual report notification)			

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



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FLORIDA DEPARTMENT OF SUATE SECRETARY OF STATE AS A CONTROL OF COMPONENT OF COMPON

February 4, 2011

NORA E. FABRICIO 14267 SW 62 ST MIAMI, FL 33183

SUBJECT: STEAM-PRO Ref. Number: W11000004588

We have received your document for STEAM-PRO and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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: 511A00003097

ARTICLES OF INCORPORATION

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

The name of the corp	STEAMPRO OF MIAN soration shall be:	II INC.	
ARTICLE II	PRINCIPAL OFFICE Principal street address	N	Aailing address, if different is:
			
	267 SW 62 ST AMI, FL, 33183		
1717	AIVII, FL. 33 163		
ARTICLE III P			
	ch the corporation is organized is: UPHOLSTERY CLEANING		
CARPETAND	UPHOLSTERT CLEANING		
ARTICLE IV S The number of shares			
the number of shares	S OT STOCK IS:100		
	NITIAL OFFICERS AND/OR DIRECTO		
	e:NORA E. FABRICIO		
Address:	14267 SW 62 ST MIAMI, FL. 33183		
	WIAWII, L. 35 163		
N. 100'-1			
Name and Titili Address:	e:		
Address.	<u></u>	Address.	
			
Name and Title	e:	Name and Title:	
Address:			
	REGISTERED AGENT		
	da street address (P.O. Box NOT acceptable)	of the registered ager	nt is:
Name: Address:	NORA E. FABRICIO 14267 SW 62 ST		
Addiçss,	MIAMI_FL_33183		
	,		
	NCORPORATOR		
Name:	ess of the Incorporator is: NORA E. FABRICIO		
Address:	14267 SW 62 ST		
110014521	MIAMI, FL. 33183		
Havina haan namad	as registered agent to accept service of proce	ess for the above sta	tad cornoration at the place devianated in
	familiar with and accept the appointment as re		
	O + 1.		.
Xilona	2. Haline		01/30/2011
UV	Required Signature/Registered Agent		Date
I submit this docum	ent and affirm that the facts stated herein a	re true. I am awaro	that the false information submitted in a
	ent und affirm that the facts stated herein a artment of State constitutes a third degree felo		
\ 1	\mathcal{I}_{Λ} .		•
X+ord	a alread		01/30/2011
UV	Required Signature/Incorporator		Date