

PI10000028486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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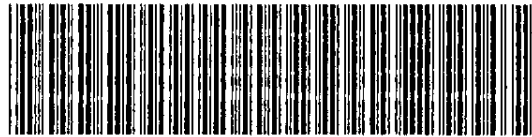
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
11 MAR 18 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W11-16507

YMD 3/23

COVER LETTER

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

SUBJECT: Power Tech Cleaning Service
(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: ART Williams
Name (Printed or typed)

10932 Naples Ct N
Address

JAX, FL 32218
City, State & Zip

904-236-1144
Daytime Telephone number

ptcs2097@gmail.com
E-mail address: (to be used for future annual report notification)

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: Power Tech Cleaning Services INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

10932 Naples Ct N
JAX, FL 32218

Mailing address, if different is:

P.O. Box 9846
JAX, FL 32218

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide public Service in the form of
Cleaning and Restoration. We aim to provide great customer Service and
Customers with professionalism, Integrity, honesty and attention to detail.

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ART Williams - President
Address: 10932 Naples Ct N
JAX, FL 32218

Name and Title: _____
Address: _____

Name and Title: LeSandra Williams - VP
Address: 10932 Naples Ct N
JAX, FL 32218

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: ART WILLIAMS
Address: 10932 Naples Ct N
JAX, FL 32218

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ART WILLIAMS
Address: 10932 Naples Ct N
JAX, FL 32218

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

Art Williams
Required Signature/Registered Agent

3/15/11
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.

Art Williams
Required Signature/Incorporator

3/15/11
Date