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COVER LETTER

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

SUBJECT: KLEANER IMAGE, 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: PATRICK RAPHAEL
Name (Printed or typed)

506 MACARTHUR DRIVE
Address

ORLANDO FL 32839
City, State & Zip

407-232-0978
Daytime Telephone number

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

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

March 21, 2011


Patrick Raphael
506 MacArthur Drive Orlando
Orlando, Florida 32839

To Whom It May Concern:

I Patrick Raphael am the owner and president of Kleaner Image Inc., I have no plans of reinstating the Articles of Incorporation for Kleaner Image Inc., and wish to release the name as soon as possible; and file with new Articles of Incorporation documents attach.

Any question or concerns please contact me at 407-232-0978.

Sincerely,


Patrick Raphael
President

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: **KLEANER IMAGE, INC.,**

ARTICLE II PRINCIPAL OFFICE

Principal street address
506 MACARTHUR DRIVE
ORLANDO, FLORIDA 32839

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PROVIDE ANY LEGAL FOR PROFIT BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patrick Raphael, President	Name and Title: _____
Address: 506 Macarthur Drive	Address: _____
Orlando, Florida 32839	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: **Patrick Raphael**
Address: **506 Macarthur Drive**
Orlando, Florida 32839

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Patrick Raphael**
Address: **506 Macarthur Drive**
Orlando, Florida 32839

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

Patrick Raphael

Required Signature/Registered Agent

3/21/2011

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.

Patrick Raphael

Required Signature/Incorporator

3/21/2011

Date

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DEPT. OF STATE
CORPORATION DIVISION