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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 617-6381

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

DIVISION OF CORPORATIONS

11 MAY -4 PM 4:32

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
EXPERT CLEANING SOLUTIONS INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 MAY -4 PM 1:28

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ARTICLES OF INCORPORATION

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

11 MAY -4 PM 1:28

**ARTICLE I NAME**

The name of the corporation shall be: **EXPERT CLEANING SOLUTIONS INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**8937 SW 12 ST**

**MIAMI, FL 33174**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**ANY AND ALL LAWFUL BUSINESS**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**      **51% MIRIAM PLANAS, 49% ANNE ENGLE-OCHOA**

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

Name and Title: **P-MIRIAM PLANAS**

Address: **8937 SW 12 ST**

**MIAMI, FL 33174**

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

Address: \_\_\_\_\_

Name and Title: **VP-ANNE ENGLE-OCHOA**

Address: **10441 SW 80 ST**

**MIAMI, FL 33173**

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: **MIRIAM PLANAS**

Address: **8937 SW 12 ST**

**MIAMI, FL 33174**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **MIRIAM PLANAS**

Address: **8937 SW 12 ST**

**MIAMI, FL 33173**

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

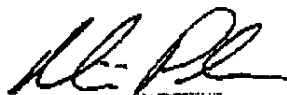


Required Signature/Registered Agent

5/04/2011

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.817.135, F.S.



Required Signature/Incorporator

5/04/2011

Date

H11000124402