

P110000066985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

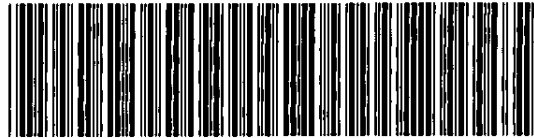
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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07/26/11--01022--003 \*\*70.00

RECEIVED

11 JUL 26 AM 11:54

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

11 JUL 26 PM 12:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/26/11

COVER LETTER

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

**FILED**  
11 JUL 26 PM 12:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: BELLA'S Home Moving & 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: Natasha Manning  
Name (Printed or typed)  
PO BOX 180244  
Address  
Tallahassee FL 32318  
City, State & Zip  
754-214-5663  
Daytime Telephone number  
  
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:

BELLA'S Home Moving & Cleaning Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2660 Old Bainbridge Rd  
Tallahassee  
Fl 32303

Mailing address, if different is:  
PO Box 180244  
Tallahassee Florida 32318

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose for the business is  
for Moving & Cleaning Homes &  
Business and Contributing to  
Society.

**ARTICLE IV SHARES**

The number of shares of stock is: 10

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

Name and Title: NATASHA Manning President  
Address: 2660 Old Bainbridge Rd  
Tallahassee  
Fl 32303

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: NATASHA Manning  
Address: 2660 Old Bainbridge Rd  
Tallahassee Fl 32303

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: NATASHA Manning  
Address: 2660 Old Bainbridge Rd  
Tallahassee Fl 32303

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

Jul-26-11  
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.



Required Signature/Incorporator

Jul-26-11  
Date