P11000082245

	(Requestor's Name)				
(Address)					
	(Address)				
	(City/State/Zip/Phone #)				
PICK-UI	P WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of 9	Status			
Special Instructions to Filing Officer:					



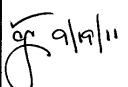
100211303481

08/31/11--01015--009 **78.75

2011 SEP 16 PM 3: 5

Office Use Only

505-W11000045417



COVER LETTER

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

SUBJECT: CHAKELY LAUNDRY SERVICES, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:	ł
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM: VICTOR RAMIREZ Name	(Printed or typed)		
605 NW. 72 AVE., APT.	# 510 Address	201 SEP	
MIAMI, FL. 33126 City,	State & Zip		TARY OF CON
(786) 333-8041 Daytime To	elephone number	ಗ	, 3 <u>3</u>
E-mail address: (to be used	for future annual report	notification)	

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



RECEIVED

11 SEP 16 AM II: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 1, 2011

VICTOR RAMIREZ 605 NW 72 AVENUE APT. #510 MIAMI, FL 33126

SUBJECT: CHAKELY LAUNDRY SERVICES

Ref. Number: W11000045417

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

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 411A00020436

SECRETARY OF STATE
SECRETARY OF STATE
STATE OF CORFORATION

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

ARTICLE I The name of the co	.* * 11.1	-D. 4050 ING	SECRETARY OF STATE DIVISION OF CORPORATION
ARTICLE II	PRINCIPAL OFFICE Principal street address	·	2011 SEP 16 PM 3: 51 address, if different is:
6 .v.	05 NW. 72 AVE. APT. # 510 NAMI, FL. 33126		
	PURPOSE hich the corporation is organized is: L LAWFULL BUSINESS		
ARTICLE IV			
	es of stock is: ONE HUNDRED (100) SHA	RES OF COMM	ON STOCK
ARTICLE V Name and Ti	INITIAL OFFICERS AND/OR DIRECTORS tle: VICTOR RAMIREZ, PRESIDENT (P)	Name and Title:	
Address:	605 NW. 72 AVE. APT. # 510 MIAMI, FL. 33126	Address:	
Name and Ti	tle: ZENIA ALONSO, VICE PRESIDENT (VP)	Name and Title:	
Address:	605 NW. 72 AVE. APT # 510 MIAMI, FL. 33126	A dduoga.	
Name and Ti	tle:1		
ARTICLE VI	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable) of the	e registered agent is:	
Address:	VICTOR RAMIREZ 605 NW, 72 AVE. APT, # 510 MIAMI, FL. 33126		
ARTICLE VII	INCORPORATOR		
The <u>name and add</u>	ress of the Incorporator is:	· ·	
Name: Address:	VICTOR RAMIREZ 605 NW. 72 AVE. APT. # 510 MIAMI, FL. 33126		
Having been name his certificate, I an	d as registered agent to accept service of process for samiliar with and accept the appointment as registe	or the above stated corp cred agent and agree to	oration at the place designated is act in this capacity
			9/13/11
-	Required Signature/Registered Agent	, , , , , , , , , , , , , , , , , , , 	Date
submit this docur	nent and affirm that the facts stated herein are tra partment of State constitutes a third degree felony as	ie. I am aware that the sprovided for in s.817.1	false information submitted in 6 55. F.S.
	Victor Pamirez Required Signature/Incorporator		9/13/11
	Required Signature/Incorporator		Date