

P11000100783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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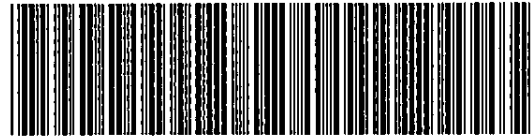
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 21 PM 2:42

PS 11/23/11

COVER LETTER

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

SUBJECT: IRMA CLEANING SERVICES , 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: **IRMA ULLOA**

Name (Printed or typed)

12061 RIVER VIEW DR

Address

BONITA SPRINGS FL 34135

City, State & Zip

239 6923737

Daytime Telephone number

MIA@NARMIINC.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

IRMA CLEANING SERVICES, INC.

The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE

Principal street address

12061 RIVER VIEW DR
BONITA SPRINGS FL 34135

Mailing address, if different is:

PO BOX 770954
NAPLES FL 34107

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
CLEANING SERVICE

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: IRMA ULLOA - PRESIDENT
Address: 12061 RIVER VIEW DR
BONITA SPRINGS FL 34135

Name and Title: IRMA GUZMAN - VICE PRESIDENT
Address: 26150 MILAGRO LN
BONITA SPRINGS FL 34135

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: MIRIAM NASCIMENTO
Address: 8040 DANCING WIND LN #1006
NAPLES FL 34119

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MIRIAM NASCIMENTO
Address: 8040 DANCING WIND LN #1006
NAPLES FL 34119

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

11/15/2011

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.



Required Signature/Incorporator

11/15/2011

Date