## P 200052039

(Danisated Name)
(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:
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Js 6/2/12

## **COVER LETTER**

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

SUBJECT: Cindy's Cleaning Servi	ce, Inc					
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)				
Enclosed are an original and one (1) copy of the arti	cles of incorporation an	d a check for:				
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED				
	ADDITIONAL C	OI I REQUIRED				
FROM: Cindy Roberts Name	e (Printed or typed)					
86044 Kutana Drive	Address					
Yulee, Florida 32097 City,	State & Zip					
904-335-7115 Daytime T	elephone 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)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

58

ARTICLE I	NAME	Cindy's Clear	ning Service, Inc	SECRETARY DIVISION OF C	SECRETARY OF ST DIVISION OF CORPOR	
The name of the	corporation shall be:	Officy's Olean	ing Service, inc	12 JUN -6	PM 12	
ARTICLE II	PRINCIPAL OFFI	CE		12 30N Q	11116	
	Principal <u>street</u> 86044 Kutana Driv Yulee,FL 32097	<u>'e</u>		ress, if different is:		
	PURPOSE which the corporation is aning services for					
ARTICLE IV The number of sh	SHARES nares of stock is: 100 s	hares with the pa	a value of \$1.00			
ARTICLE V		RS AND/OR DIREC				
Name and Address:	86044 Kutana Yulee, FL 320	Drive				
Name and Address:	Title:	<del></del>	Name and Title: Address:			
Name and Address:	Title:		Name and Title:Address:			
	REGISTERED AG lorida street address (P Cindy Robert	DENT O. Box NOT acceptab	ole) of the registered agent is:		<del></del>	
V. 1 - 11 - 10 - 10 - 10 - 10 - 10 - 10 -		2097				
ARTICLE VII The name and ac Name: Address:	INCORPORATOR ddress of the Incorporate Cindy Robert 86044 Kutans Yulee, FL 32	or is: Is a Drive	·····			
			rocess for the above stated corporal is registered agent and agree to act i		ated in	
(m	MB A Required Sign	ature/Registered Agent	<u> </u>	$\frac{S/25/l_0}{Date}$	<u>)</u>	

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

5/25/12.