P12000059110

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/Otate/Zipi/ Notice ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

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

SUBJECT:	ITTLE LATINA	PERSONAL SERVICES INC
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an or	iginal and one (1) copy of the ar	rticles of incorporation and a check for:
\$70.00 Filing Fee	Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED
FROM: _	Mania I. B	71 ,
	1610 Salzedo	st Ap 5
	Coral buble	y, State & Zip
		85-0996 Telephone number
	Maisabel	brehotmail. com sed for future annual report notification)

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

Money order# 203770 7342

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: LITTLE	ELATINA PERSONAL SEPUICES, INC
ARTICLE II PRINCIPAL OFFICE Principal street address O SALTE PO ST. Coral Gubles, Pl	APS Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is Office and Buildi	commercial and Residential Cleaning Management
ARTICLE IV SHARES The number of shares of stock is: \(\mathcal{O} \mathcal{O} \)	
Name and Title: Mana Bernaddress: Address: Total banks Coral ba	Nume and Title: Jana Much Vice-Tree Address: 1610 Saltedo St. Ap. S
Name and Title: Address:	Name and Title: Address:
Name and Title:Address:	Name and Title:Address;
Address: [6 0 Salted Coral 6 ab] ARTICLE VII INCORPORATOR	acceptable) of the registered agent is: 2 mud 5 5+ Ap 5 24 25 27 27 28 29 20 20 20 20 20 20 20 20 20
The name and address of the Incorporator is: Name: Address: Address: Corul busics	Emuida 15 st. Ap 5 FL 33 3 3 4
Having been named as registered agent to accept ser this certificate, I am familiar with and accept the appoi	vice of process for the above stated corporation at the place designated in interior interior as registered agent and agree to act in this capacity
document to the Department of State constitutes of third	red herein are true. I am aware that the false information submitted in a degree felony as provided for in s.817.155, F.S. 06 - 25 - 12
Required Signaul Hricor	Money order 20237107342