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(Requestor's Name)				
(Add	dress)			
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(City	y/State/Zip/Phone	e #)		
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PICK-UP	☐ WAIT	MAIL		
(D.,,	in and Fakita Man			
(Bus	siness Entity Nan	ne)		
(Doc	cument Number)			
Certified Copies	Certificates	of Status		
Consist Instructions to 1	Tiling Officer			
Special Instructions to F	-iling Onicer.			
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Office Use Only



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SECURITY SEATON

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COVER LETTER

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

S

SUBJECT:	miei Liome Serv	ices of Collier	County, in
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation an	d a check for:
\$70.00 Filing Fee	\$78.75. Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL COPY REQUIRED	
			•
FROM: D	aniel A Smith		
		e (Printed or typed)	
22	249 River Reach		
		Address	
N	aples, Florida 34	4104	
	City	State & Zip	
23	39-272-2342		
	Daytime 7	elephone number	
pr	emier.polishing@ic	loud.com	
	E-mail address: (to be use	ed 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)

nc <i>te ii Pr</i> 11 1st Ave	INCIPAL OFFICE Principal street address nue SW	Mailing a	Mailing address, if different is:	
ples, Flori	da 34119			
YCLE III PUI	the corporation is organized is:	Services and Ma	aintenance	
			AS J	
			<u> </u>	
ICLE IV SH	ARES 200		87ATE ORIDA	
umber of shares o	f stock is: 200 TIAL OFFICERS AND/OR DIRECTO le: Nathaniel W Moran - Presiden	_	2: 97 \$7ATE 0RIDA	
umber of shares o	f stock is: 200 TIAL OFFICERS AND/OR DIRECTO	 .t	2: η 7 87/1Ε 0RID/s	
Name and Tit Address	f stock is: 200 TIAL OFFICERS AND/OR DIRECTO le: Nathaniel W Moran - Presiden 4311 1st Ave SW	Name and Title:Address:	REDA	
Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR Nathaniel W Moran - President 4311 1st Ave SW Naples, Florida 34119	Name and Title: Address: Name and Title:	REDA	
Name and Tite Name and Tite Address Address	TIAL OFFICERS AND/OR DIRECTOR Nathaniel W Moran - Presider 4311 1st Ave SW Naples, Florida 34119	Name and Title: Address: Name and Title: Address:	N/E 97	

Name and	Title:	Name and Title:		
Address		_ Address:		
		<u> </u>		
		<u></u>		
ARTICLE VI	REGISTERED AGENT			
The name and Flo	orida street address (P.O. Box NOT acceptable) o	f the registered agent is:		
Name:	Nathaniel Moran	-		
Address:	4311 1st Ave SW	_		
	Naples, Florida 34119	_	20 11	
ARTICLE VII	INCORPORATOR		PMI2: 07	
The name and ad-	dress of the Incorporator is:			
Name:	Daniel A Smith	_	(전) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
Address:	2249 River Reach Drive	_		
	Naples, Florida 34104	_		
Having been nam this certificate, I a	ned as registered agent to accept service of proces on familiar with and accept the appointment as re	gistered agent and agree to act in	n at the place designated in this capacity	
	Required Signature/Registered Agent		Date	
	unent and affirm that the facts stated herein are Department of State constitutes a third degree felo			
	_ \ \		01/09/2013	
Required Signature/Incorporator			Date	