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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

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

SUBJECT: K & H Commercial And Home 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 \$78.75 □ \$78.75 **\$87.50** Filing Fee Filing Fee, Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Kazim Hasan Name (Printed or typed) 424 Raven Wav Address Naples, Fl. 34110 City, State & Zip 239-280-7151 Daytime Telephone 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)

PRINCIPAL OFFICE Principal street address 24 Raven Way aples, FL. 34110 PURPOSE Principal street address Cleaning Services Address Address Address Mailing address, if different is: Address Address Mailing address, if different is: Address Address Mailing address, if different is: Address Address Address: Mailing address, if different is: Address Address Address: Mailing address, if different is: Address Address Mailing address, if different is: Address Address: Address Address: Address Address: Name and Title: Address Address:	ICLE I NAM ame of the corporat			
TICLE IV SHARES purpose for which the corporation is organized is: TICLE IV SHARES number of shares of stock is: TICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Name and Title: Name and Title: Address Name and Title:	ICLE II PRI		Mailing addres	s, if different is:
TICLE IV SHARES purpose for which the corporation is organized is: TICLE IV SHARES number of shares of stock is: 100 TICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Kazim Hason Russion Mame and Title: Shares Address Naples, FL. 34110 Name and Title: Name and Title: Name and Title: Address Name and Title: Name and Ti	4 Raven Wa			
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Name and	d Title:	Name and Title:	·····
Address		Address:	
•			
ARTICLE VI	REGISTERED AGENT		
The name and Fl	orida street address (P.O. Box NOT accepta	ble) of the registered agent is:	~
Name:	Kazim Hasan		
Address:	424 Raven Way		SECRE ISIOH FEB
	Naples, Fl. 34110		OF CO
ARTICLE VII	INCORPORATOR	·	OF STAID ORPORATION AM II:
The name and ad	Idress of the Incorporator is:		5
Name:	Kazim Hasan		·γ.
Address:	424 Raven Way		
	Naples, Fl. 34110		
Having been nan this dertificate, I	ned as registered agent to accept service of p ayn familiar with and accept the appointment	as registered agent and agree to ac	ation at the place designated in et in this capacity 2/5/13
	Required Signature/Registered Ager	nt	Date
document to the	rument and affirm that the facts stated herei Department of State constitutes a third degree	in are true. I am aware that the fa e felony as provided for in s.817.15:	lse information submitted in a 5, F.S.
1 Me	Required Signature/Incorporator		7 000

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

		cial And Home Services, I		•
ARTICLE II PRI	NCIPAL OFFICE Principal street address	Mailing address, if different is:		
424 Raven Wa	-			
Naples, FL. 3	4110			
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ARTICLE III PUR The purpose for which t	POSE he corporation is organized is:	ning Services		
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	TAL OFFICERS AND/OR DIREC Kazim Hason			
		Name and Title:		
Address	424 Raven Way	Address:		
	Naples, FL. 34110			 .
Name and Title:		Name and Title:		
Address		Address:		
				
Name and Title:		Name and Title:		
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Name a	nd Title:	Name and Title:	
Addres		Address:	
ARTICLE VI The name and I Name: Address:	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable Kazim Hasan 424 Raven Way	SECRE DIVISION TO THE PROPERTY OF THE PROPERTY	
ARTICLE VII	Naples, Fl. 34110 INCORPORATOR address of the Incorporator is:	FILL OF STATE ARY OF CORPORATIONS -8 AM II: 15	
Name: Address:	Kazim Hasan 424 Raven Way Naples, Fl. 34110	—- —-	
	amed as registered agent to accept service of pro	ocess for the above stated corporation at the place designated in is registered agent and agree to act in this capacity	
l submit this do	Required Signature/Registered Agent ocument and affirm that the facts stated herein the Department of State constitutes a third degree	are true. I am aware that the false information submitted in a	
	Required Signature/Incorporator	Date	