

4/9/2013 16:55:10 From: To: (850) 617-6381

(1/4)

Division of Corporations

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**Florida Department of State
Division of Corporations
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(((H13000080230 3)))



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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
SUPERIOR CLEANING SERVICES OF FLORIDA, INC.**

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

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DIVISION OF CORPORATIONS
FLORIDA

13 APR - 9 AM 9:46

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13 APR - 9 AM 8:15

J. Shivers APR 10 2013

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COVER LETTER

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

SUBJECT: SUPERIOR CLEANING SERVICES OF FLORIDA, 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: MARIA D. RODRIGUEZ

Name (Printed or typed)

2700 SO UNIVERSITY DRIVE 4D

Address

DAVIE, FLORIDA 33328

City, State & Zip

(954) 347-2313

Daytime Telephone number

MARIA@MEDCONSULTANTSERVICES.COM

E-mail address: (to be used for future annual report notification)

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

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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: **SUPERIOR CLEANING SERVICES OF FLORIDA, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

2501 SW 79 AVENUE #307

SAME

DAVIE, FLORIDA 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CLEANING SERVICE

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **ARMANDO ALMEIDA, PRESIDENT**

Name and Title:

Address: **2501 SW 79 AVENUE**
#307

Address:

DAVIE, FLORIDA 33324

Name and Title: **NOHEMY ALMEIDA, VICE PRESIDENT**

Name and Title:

Address: **2501 SW 79 AVENUE**
#307

Address:

DAVIE, FLORIDA 33324

Name and Title:

Name and Title:

Address:

Address:

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SEC. OF STATE
TALLAHASSEE, FLORIDA

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(cont.)

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIA D. RODRIGUEZ
Address: 2700 SO UNIVERSITY DRIVE 4D
DAVIE, FLORIDA 33328

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ARMANDO ALMEIDA
Address: 2501 SW 79 AVENUE #307
DAVIE, FLORIDA 33324

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

4-9-13
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

4-9-13
Date

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