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13 JUN -6 AM 8:54, SECRETARY OF STATE TAIL AHASSEE FLORIDA

COVER LETTER

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

SUBJECT: Fles	shly Cleaned Inc		
50 1 5011		TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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 o Status
	egy on participation of the	ADDITIONAL CO	OPY REQUIRED
	na Perez Name 357 Hawks Land	e (Printed or typed)	<u> </u>
F	ort Myers, Florida		
(2	39)939-4637	State & Zip	
	rchbrgdona,		
·	E-mail address: (to be use		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)

	INCIPAL OFFICE Principal street address Landings #104	Mailing a	ddress, if different is:
	Florida 33907		
TICLE III PUT purpose for which	RPOSE the corporation is organized is:	d All Lawful Pur	poses
number of shares o	ITIAL OFFICERS AND/OR DIRECTOR	<u>es</u>	13 JUN -6 AH 8: SECRETARY OF ST TALLAHASSEE FLOT
number of shares o	f stock is:	S Name and Title:	JUN -6 AH CRETARY OF LAHASSEE F
number of shares of shares of the share of the share and Tite of the share and Tite of the share	rtial officers and/or director le: Ana Perez -President	SS Name and Title:	JUN -6 AH 8: CRETARY OF ST LAHASSEE FLO
number of shares of shares of shares of shares of share and Tite Address	TIAL OFFICERS AND/OR DIRECTOR le: Ana Perez -President 5357 Hawks Landing #104	Name and Title: Address:	JUN -6 AH 8: 54 CRETARY OF STATE LAHASSEE FLORIDA
number of shares of shares of shares of shares of share and Tite Address	TIAL OFFICERS AND/OR DIRECTOR le: Ana Perez -President 5357 Hawks Landing #104 Fort Myers, FL 33907	Name and Title: Address:	JUN -6 AH 8: 54 CRETARY OF STATE LAHASSEE FLORIDA
Name and Titl Address Address	trial officers and/or director le: Ana Perez -President 5357 Hawks Landing #104 Fort Myers, FL 33907	Name and Title: Address: Name and Title: Address:	JUN -6 AH 8: 54 CRETARY OF STAIL LAHASSEE FLORIDA

Name an	d Title:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address		Address:	
ARTICLE VI The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Donald C Richbourg Jr		
Address:	8695 College Parkway Suite 1328		
	Fort Myers, FL 33919		
ARTICLE VII	INCORPORATOR		
The <u>name and ac</u>	idress of the Incorporator is:		
Name:	Ana Perez		
Address:	5357 Hawks Landing #104		
	Fort Myers, FL 33907		
this certificate, I	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	istered agent and agre	
Donned C	Required Signature/Registered Agent		06/1/2013
<u> </u>	Required Signature/Registered Agent		Date
I submit this doc	cument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	rue. I am aware that	
Core	Lind		06/1/2013
	Required Signature/Incorporator		Date

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

Principal street address 7 Hawks Landings #104 Myers, Florida 33907 CLE III PURPOSE pose for which the corporation is organized is: Any and All Lawful Purposes CLE IV SHARES nber of shares of stock is: 5,000 shares par value \$1.00		ME ation shall be: Fleshly Cleaned In	
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Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Flo	orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Donald C Richbourg Jr	
Address:	8695 College Parkway Suite 1328	
	Fort Myers, FL 33919	
ARTICLE VII	INCORPORATOR	
The name and add	dress of the Incorporator is:	
Name:	Ana Perez	
Address:	5357 Hawks Landing #104	
•	Fort Myers, FL 33907	
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
Donned C.		06/1/2013
	Required Signature/Registered Agent	Date
	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon	true. I am aware that the false information submitted in a v as provided for in s.817.155, F.S.
Cose	and	06/1/2013
	Required Signature/Incorporator	Date