

P 1300068191

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100249988321

08/15/13--01016--003 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 AUG 15 PM 12:07

Ps 8/20/13

August 08, 2013

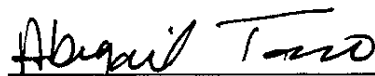
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Ref: Company : TORO'S CLEANING SERVICES , INC.  
Document # : P06000129600

I, Abigail Toro, President of Toro's Cleaning Services, Inc. Document # P06000129600  
With the present I certified my no intention of revoking the Articles of Dissolution on  
August 08, 2013, therefore, releasing the name for use to another entity.

If you have any question about this letter, please do not hesitate to contact me .

Sincerely :

A handwritten signature in black ink that reads "Abigail Toro". The signature is written in a cursive style and is positioned above a horizontal line.

Abigail Toro  
7141 SW 15<sup>TH</sup> Street  
Pembroke Pines, FL 33023

## COVER LETTER

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

SUBJECT: **TORO'S CLEANING 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  
Filing Fee      Filing Fee  
& Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                 & Certificate of  
                                 Status  
**ADDITIONAL COPY REQUIRED**

FROM: **ABIGAIL TORO**

Name (Printed or typed)

**7141 S.W. 15th STREET**

Address

**PEMBROKE PINES, FL 33023**

City, State & Zip

**(954)392-8669**

Daytime Telephone number

**FPYSERVICES@COMCAST.NET**

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)

**ARTICLE I NAME**

The name of the corporation shall be: **TORO'S CLEANING SERVICES, INC.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 AUG 15 PM 12:07

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

**7141 S.W. 15th STREET**  
**PEMBROKE PINES, FL 33023**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **FOR ALL LEGAL BUSINESS AND**  
**ACTIVITIES IN FLORIDA STATE AND UNITED STATES OF AMERICA**

**ARTICLE IV SHARES**

The number of shares of stock is: **1000**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **ABIGAIL TORO- PRESIDENT**

Name and Title: \_\_\_\_\_

Address **7141 S.W. 15th STREET**  
**PEMBROKE PINES, FL 33023**

Address: \_\_\_\_\_

Name and Title: **ABIGAIL TORO- TREASURY**

Name and Title: \_\_\_\_\_

Address **7141 S.W. 15th STREET**  
**PEMBROKE PINES, FL 33023**

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

(conti.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

13 AUG 15 PM 12:07

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: FPY ACCOUNTING SERVICES INC

Address: 9221 CRESCENT DRIVE

MIRAMAR, FL 33025

**ARTICLE VII INCORPORATOR**

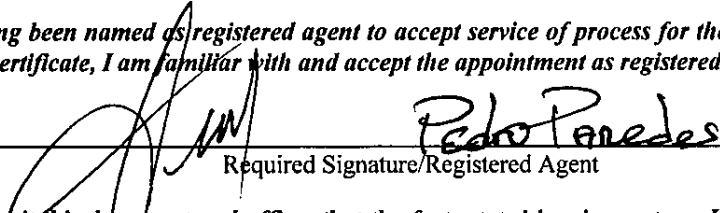
The name and address of the Incorporator is:

Name: ABIGAIL TORO

Address: 7141 SW 15 STREET

PEMBROKE PINES FL 33023

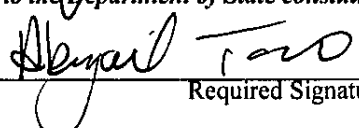
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

08/08/2013

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

08/08/2013

Date