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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
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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
MIAMI CLEANING PROFESSIONALS CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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13 OCT 21 PM 12:02
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October 21, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: MIAMI CLEANING PROFESSIONALS CORP.
REF: W13000058187

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The complete document was not received. Please refax the complete document, including the electronic filing cover sheet.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

FAX Aud. #: H13000231425
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OCTOBER 17, 2013

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19 OCT 21 PM 12:02
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Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of Miami Cleaning Professionals Corp.
of Doc # P12000036552 are the same owners of the attached
articles of incorporation. We have dissolved the company and have no intention
of reopening it. Thank you for your help in this matter.

Very sincerely,



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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

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ARTICLE I - NAME

The name of the corporation shall be:

Miami Cleaning Professionals Corp.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

P- 3000 SW 19 ST. Miami FL 33145

M- P.O. Box 145392. Coral Gables FL 33114

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAFAEL A. PADRON

3000 SW 19 ST.

Miami FL 33145

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

RAFAEL A. PADRON
3000 SW 19 ST.
Miami FL 33145

The undersigned incorporator has executed these Articles of Incorporation this

17th day of OCTOBER 20 13.



Signature

ARTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

RAFAEL A. PADRON (P)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.



Registered Agent Signature

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