

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAR 13 PM 2:09



## COVER LETTER

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

SUBJECT: Pelican Bay 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: Morcate Soto, Laura  
Name (Printed or typed)

260 Southbay Dr Unit 214  
Address

NAPLES, FL 34108  
City, State & Zip

(786) 503-1364  
Daytime Telephone number

laura.mrct@yahoo.com  
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: Pelican Bay Cleaning Services Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

260 Southbay DR

Unit 214

NAPLES, FL 34108

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose of this  
Corporation is to help the citizens of SWFL  
with their home cleaning. My goal is to reach  
customers satisfaction and all of their needs.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Morcate, Laura (P) Name and Title: \_\_\_\_\_

Address 260 Southbay DR Address: \_\_\_\_\_

Unit 214

Naples, FL 34108

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

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

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

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

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(conti.)

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: Cruz, Alain  
Address: 260 Southbay Dr  
Naples, FL 34108

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Morcate, Laura  
Address: 260 Southbay Dr  
Naples, FL 34108

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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

3/5/14

\_\_\_\_\_  
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

3/5/14

\_\_\_\_\_  
Date