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(Cit	y/State/Zip/Phone	e #)
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Certified Copies	Certificates	of Status
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Office Use Only

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TAMAY IL PH 3: 59
SECRETARY OF STATE
TALL AHASSEE ET OBBO

or 5/15/14

COVER LETTER

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

SUBJECT: Metropolis Cleaning Services Tro. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an orig	ginal 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 of Status			
		ADDITIONAL CO	DPY REQUIRED			
FROM:(oclando Sa Nama	e (Printed or typed)				
81	3 W. Birchu	Address				
<u>¥</u>	nissimmee, F	C 34743 State & Zip	SECRE IALLAI	14 M		
	407 - 463-706 Daytime T	Celephone number	TARY OF IASSEE,	FILED		
20	Smail address: (to be use	for future annual report	FLOOD	D 3: 5:		

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 24, 2014

ORLANDO SANTIAGO 813 W. BIRCHWOOD CIR. KISSIMMEE, FL 34743

SUBJECT: METROPOLIS CLEANING SERVICES INC.

Ref. Number: W14000023006

We have received your document for METROPOLIS CLEANING SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 314A00008809



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 10, 2014

ORLANDO SANTIAGO 813 W. BIRCHWOOD CIR. KISSIMMEE, FL 34743

SUBJECT: METROPOLIS CLEANING SERIVCES INC.

Ref. Number: W14000023006

We have received your document for METROPOLIS CLEANING SERIVCES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 414A00007771

14 MAY 14 PH 3: 59
SECRETARY OF STATE
TALLAHASSEE, FI ORIDA

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

RTICLE II I	PRINCIPAL OFFICE Principal street add	-		Mailing address, if different	ent is:
<u>3 w.C</u>	rchussed	deir.			
jissim c	nee, Fl 3	34743			
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RTICLE V 1	SHARES s of stock is: NITIAL OFFICERS	AND/OR DIRECTO	Name and Title	at a parva	
ne number of share.	SHARES Sof stock is: NITIAL OFFICERS Fitle Oclando	AND/OR DIRECTO	Name and Title		
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Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT ac	cceptable) of the registered agent is:
Name: Octando Santie	<u> </u>
Address: 818 W.Birchwood	ed cir
Kissi, FC 34743	<u> </u>
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Ordendo Sent Address: 813 W. Birchu	iago
Lissimmee, Fi	<u> 1347</u> 43
	ce of process for the above stated corporation at the place designated in atment as registered agent and agree to act in this capacity
	4 Agent Date
Required Signature/Registered	d Agent Date
I submit this document and affirm that the facts stated document to the Department of State constitutes a third of	t herein are true. I am aware that the false information submitted in a degree felony as provided for in s.817.155, F.S.
Required Signature/Vicorpion	4/21/14 prator Date
required signature/precupor	naun Datt

FILED

14 MAY IL PH 3: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA