

P14000056979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

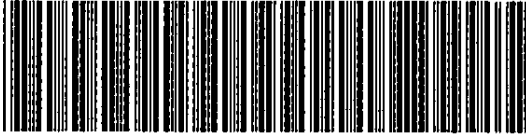
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/30/14--01019--015 **78.75

APPROVAL
AND
FILED
14 JUN 30 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

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

SUBJECT: SPRING CLEAN 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
Filing Fee

\$78.75 ~~X~~
Filing Fee
& Certificate of Status

<input checked="" type="checkbox"/> \$78.75 ✓ Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ERNESTO L EGAS
Name (Printed or typed)

2830 NW 115 TERRACE
Address

CORAL SPRINGS, FL 33065
City, State & Zip

954 993 1852
Daytime Telephone number

ernestoegas@gmail.com
E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED

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

ARTICLE I NAME Spring Clean Services, Inc 14 JUN 30 PM 4:41
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

2830 nw 115 terrace
Coral Springs, Fl 33065

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Janitorial

ARTICLE IV SHARES 1000
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ernesto L Egas(President)

Name and Title: Raul Guzman(Vice-President)

Address 2830 NW 115 terrace
Coral Springs, Fl 33065

Address: 10654 Royal Palm Blvd
Coral Springs, Fl 33065
Apt#54

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

APPROVED
AND
FILED

(cont.)

14 JUN 30 PM 4:41

Name and Title: _____	Name and Title: <u>SECRETARY OF STATE</u>
Address _____	Address: <u>TALLAHASSEE, FLORIDA</u>
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Ernesto L Egas

Address: 2830 NW 115 Terrace
Coral Springs, FI 33065

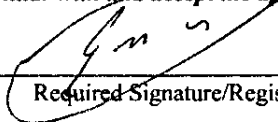
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ernesto L Egas

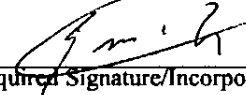
Address: 2830 NW 115 Terrace
Coral Springs, FI 33065

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

June 25/2014
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

June 25/2014
Date