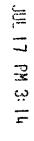
(Requ	estor's Name)	<u></u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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## **COVER LETTER**

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

SUBJECT:	PROPOSED CORPORA	of Tallaha	issee
	(PROPOSED CORPARA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
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  ADDITIONAL CO	& Certificate of Status
	S' 44		
FROM:	SANDRA MACK	(Printed or typed)	
	1865 Sagebrook		
	Tall, Fla 3230:	3	_
			·· <del></del>
	950 339 380 Daytime T	elephone number	
	Masandra 8420 g E-mail address: (to be use	mail. Com d 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)

The name of the corporation	shall be: SAS Clean	in at Talla	chassee live
	IPAL OFFICE	7	
Pr	ncipal street address		ing address, if different is:
1862	Sagebrook dr E 32303	186	2 Sagebrook dr 11, FC 32303_
Tall ,	E 37207	Ta	11. FC 32303-
	<del></del>		ALEG
RTICLE III PURPO	SF.		
e purpose for which the	corporation is organized is: <u>Cka</u>	NING Company	
		<i>J</i> , ,	
			ORIC ORIC
Mr. 1787 - 7787 - 17			
RTICLE V INITIA	L OFFICERS AND/OR DIRECT	<u>rors</u>	
Name and Title:	Janara Mack	Name and Title:	president
Address	Sandra Mack 1862 Sagebrook Tall, FL 32303	Address:	Same
_	Tall, FL 32303		
	,		
<del></del>			
Name and Title:		Name and Title:	
		Address:	
		Address:	
		Address:	
Address		Address:	
Address Name and Title:		Address:  Name and Title:	
Address Name and Title:		Address:  Name and Title:	
Address Name and Title:		Address:  Name and Title:	

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: Sendra Macie	AL SEE	
Address: 1862 Sagebrook Thill, FC 32303	dr E	
Tall, Fe 32303	See 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	8
ARTICLE VII INCORPORATOR	OSTA	
The name and address of the Incorporator is:		
Name: Sandra M.	4-CIL	
Name: Sandra M. Address: 1862 Sage Tall, FL	brook dr	
Tall, FL	32303	
	pt service of process for the above stated corporation at the place designated e appointment as registered agent and agree to act in this capacity	! in
Somba Maca	7/14/14	
Required Signature/R	egistered Agent Date	-
	ts stated herein are true. I am aware that the false information submitted in a third degree felony as provided for in s.817.155, F.S.	n a
10/1 700	ml. 1	
Stown Much	1/4/14	