

P1400007229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

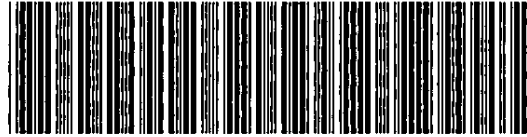
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300263754173

08/28/14--01006--004 **78.75

APPROVED
AND
FILED

14 AUG 28 PM 3:40

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: Top Maid 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: Anita M. Dyal
Name (Printed or typed)
9020 Edgewater Bend
Address
Parkland, FL 33076
City, State & Zip
954-800-7721
Daytime Telephone number
a_dyal@hotmail.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 Top Maid Inc.

The name of the corporation shall be: _____

APPROVED
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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9020 Edgewater Bend

14 AUG 28 PM 3:40

Parkland, FL 33076

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

a cleaning service

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 1000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anita M. Dyal, President

Name and Title: _____

Address 9020 Edgewater Bend

Address: _____

Parkland, FL 33076

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

APPROVED
AND
FILED

Name and Title: _____

Name and Title: _____

14 AUG 28 PM 3:40

Address _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

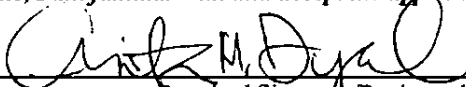
Name: Anita M. Dyal
Address: 9020 Edgewater Bend
Parkland, FL 33076

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

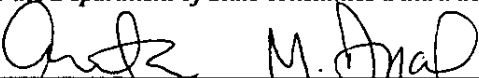
Name: Anita M. Dyal
Address: 9020 Edgewater Bend
Parkland, FL 33076

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

8/25/14
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

8/25/14
Date