

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
COMPLETE PROPERTY CARE, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT 27 PM 12:07

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OCT 28 2014

J. SCOTT

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Articles of Incorporation

IN COMPLIANCE WITH CHAPTER 607 AND/OR CHAPTER 621, F.S.

Article I - Name: The name of the corporation shall be

Complete Property Care, Inc.

Article II - Principal and Mailing Address

12227 Country White Circle
Tampa, FL 33635

Article III - Shares

The number of shares of stock is: 100

Article IV - Initial Officers and/or Directors

Jesus Gonzalez (P)

Article V - Registered Agent

The name and Florida street address of the registered agent is:

Jesus Gonzalez
12227 Country White Circle
Tampa, FL 33635

Article VI - Incorporator

The name and address of the incorporator is:

12227 Country White Circle
TAMPA, FL 33635
Jesus Gonzalez

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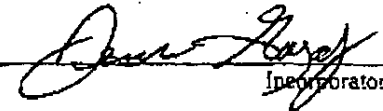
Required Signatures:

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

x 
Registered Agent

09/14
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.

x 
Incorporator

09/14
Date

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JUL 27 2014

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