

P150000 19466

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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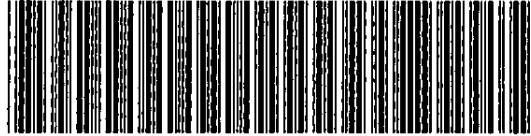
(Business Entity Name)

(Document Number)

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15 FEB 27 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 3/2

COVER LETTER

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

SUBJECT: _____

Cecy's Cleaning of Naples 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
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: _____

Cecilia Agüero

Name (Printed or typed)

5500 29th PL SW

Address

Naples FL. 34116.

City, State & Zip

239-961-6848.

Daytime Telephone number

cecycoli@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

The name of the corporation shall be: Cecy's Cleaning of Naples Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

5500 29th PL SW
Naples, FL 34116.

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all Lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

1.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cecilia Agüero Name and Title: _____

Address: President Address: _____

5500 29th PL SW

Naples, FL 34116.

Name and Title: Raul Coliqueo/VP Name and Title: _____

Address: 5500 29th PL SW Address: _____

Naples, FL 34116.

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(conti.)

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:

Cecilia Aguero

Address:

5500 29th Pl SW

Naples, FL 34116

15 FEB 27 PM 2:00
DEPT. OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name:

Cecilia Aguero

Address:

5500 29th Pl SW

Naples, FL 34116

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

[Signature]
Required Signature/Registered Agent

11-7-14
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.

[Signature]
Required Signature/Incorporator

11-7-14
Date