## P15000051809

	(Requestor's Name)
<u> </u>	(Address)
	(Address)
*	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
· ·	
	Office Use Only



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## **COVER LETTER**

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

SUBJECT:	Haribel Clean (PROPOSED CORPORA	ing Services	5
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
•	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM:	Haribel Hart		
	2921 Devon	shire 5+	
	Delfona ,		738
		State & Zip $67 - 4382$ Gelephone number	
r	nartinez maribo	196 @ hot n	
	E-mail address: (to be use	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 corporat	ion shall be:	Maribel	Clear	ning	Serv	11/25	Corporation:	
	Principal street address			Mailing address, if different is:				
2921 Devon	shire St		-	P.0	Box	391	1218	
Deltona				Del.	tona	FL	32739	
ARTICLE III PURPO The purpose for which the		rganized is:						
							SECRE TALLAL 5 JI	
						-	N 12 PH	
ARTICLE IV SHARE The number of shares of s							L. O3	
ARTICLE V INITIAL  Name and Title			r Name	and Title:_	Mar	ibel	Owner	
Address		Pevonshire & FL 3278					Owner 39122391218 fl 32739	
		Hartinez an Owne		-			<del></del>	
Address		Devonshire S a FL 327:					39/218 FL	
	06170110	y c sex		_			ς	
Name and Title:	Daniela	Martner C	Name	and Title:_	Doniell	· Ma	Anaz Owner	
Address		ovonshire s	Addres	ss:	P.0	Bo	X 39/2/8	
	Delfor	ic fl		_	DEH	ona	H	
-	35	-738		<del>-</del>	3 2	2739	7	

Name and Title:	Thonny F. Realpe Owne	Name and Titl	e: Thonny	F. Realpr Owne
Address	2921 Devonshire of	Address:	P. 0 BOX	391218
	Deltona fl		Detona	EL 32739
	32738			
ARTICLE VI REGIS The name and Florida s	TERED AGENT treet address (P.O. Box NOT acceptable) of	the registered a	gent is:	
Name:	42+ Devonshire St Mc	urbel Hark	!ine?	
Address:	Del 2921 Devonshire st			
	Del 2921 Devonshire st Deltona FL 32738			
ARTICLE VII INCOR	<u>RPORATOR</u>			
The name and address of	•			
	Maribel MAMI	nez.	,	
Address:	2921 Devonshire 5f Delfona fl 32738			
	Delfona. fl 32738			
ADTICLE VIII FEEE	CTIVE DATE.			
Effective date, if other th	an the date of filing:	(0		
days after the filing.)	sted, the date must be specific and cannot	de more than	live business days	prior or 90 business
	d in this block does not meet the applicable s date on the Department of State's records.	statutory filing r	equirements, this da	ate will not be listed as
	registered agent to accept service of process iliar with and accept the appointment as regi			
Man	ibel Hanting			4/29/2015
	Required Signature/Registered Agent			Date
I submit this document a document to the Departm	ind affirm that the facts stated herein are t ent of State constitutes a third degree felony	true. I am awar as provided for	e that the false infe r in s.817.155, F.S.	ormation submitted in a
/.	mibel Hanting			4/19/2012
Required Sign	nature/Incorporator	<u> </u>		4/19/2015 Date