

P15000058927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

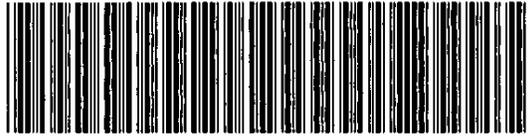
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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07/10/15--01001--006 **78.75

15 JUL 10 AM 9:46
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COVER LETTER

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

SUBJECT: LAJ cleaning services Co.
(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: Luisa Alonso
Name (Printed or typed)

6851 SW 29 st
Address

Miami, FL 33155
City, State & Zip

305-300-6086
Daytime Telephone number

lajcleaningservices@yahoo.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: LAD Cleaning Services Co.

ARTICLE II PRINCIPAL OFFICE

6851 SW 29 ST
Principal street address

Miami, FL 33155

Mailing address, if different is:

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LAD

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of this corporation being organized is to provide private and smaller companies a cleaning service for their facilities.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Luisa Alorzo (President) Name and Title: _____

Address 6851 SW 29 ST Address: _____
Miami, FL 33155

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: Luisa Alonso (President) Name and Title: _____
Address: 6851 SW 29st Address: _____
Miami, FL 33155 _____

ARTICLE VI REGISTERED AGENT

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

Name: Luisa Alonso
Address: 6851 SW 29st
Miami, FL 33155

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ARTICLE VII INCORPORATOR

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

Name: Luisa Alonso
Address: 6851 SW 29st
Miami, FL 33155

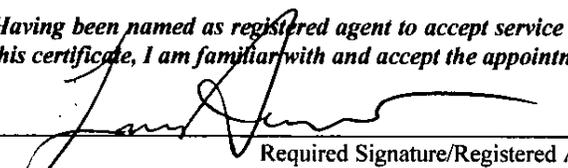
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

7/6/15
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

7/6/15
Date