

P15000074487

(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



700276594687

09/03/15--01025--004 \*\*78.75

15 SEP -3 AM 11:49  
RECEIVED  
FEB 11 2016

MD 9/14

## COVER LETTER

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

**SUBJECT:** Maria's Angels Multi Services 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:** Maria E. Francia Chen

\_\_\_\_\_  
Name (Printed or typed)

709 Burgundy #O

\_\_\_\_\_  
Address

Delray Beach, FL 33484

\_\_\_\_\_  
City, State & Zip

305-469-6695

\_\_\_\_\_  
Daytime Telephone number

N/A

\_\_\_\_\_  
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: Maria's Angels Multi Services Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: C

709 Burgundy #O

Delray Beach, FL 33484

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: House & Commercial Cleaning, Handyman, Sod Installation

**ARTICLE IV SHARES**

The number of shares of stock is: 50

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Maria E. Francia Chen / President

Name and Title: Jimmy S. Chen / Vice President

Address 709 Burgundy #O

Address: 709 Burgundy #O

Delray Beach, FL 33484

Delray Beach, FL 33484

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: Maria E. Francia Chen  
Address: 709 Burgundy #O  
Delray Beach, FL 33484

15 SEP -3 AM 11:49  
RECEIVED  
CLERK OF COURT  
STATE OF FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: Maria E. Francia Chen  
Address: 709 Burgundy #O  
Delray Beach, FL 33484

**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*

Maria E. Francia-Chen  
Required Signature/Registered Agent

08/19/2015  
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.*

Maria E. Francia-Chen  
Required Signature/Incorporator

08/19/2015  
Date