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DEPARTMENT OF STATE
15 OCT 12 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: NOAH'S JANITORIAL SERVICE
(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: VICTOR E. BOYD
Name (Printed or typed)

140 OLD FEDERAL COURT
Address

DADE COUNTY, FLORIDA 32351
City, State & Zip

850-284-1628
Daytime Telephone number

PINKSTAR 2014@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

10-9-2015

VICTOR E. BOYD - P14000083916
NOAH'S JANITORIAL SERVICE, INC
140 OLD FEDERAL COURT
QUINCY, FLORIDA 32351

ATTN: Whom IT CONCERN!

I VICTOR E. BOYD HAVE
NO INTENTION OF USING
NOAH'S JANITORIAL SERVICE
INC. P14000083916

VICTOR BOYD
10-9-2015

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: NDAT'S JANITORIAL SERVICE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

140 OLD FEDERAL COURT
QUINCY, FLORIDA 32351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: JANITORIAL SERVICE, AND
ANY AND ALL LAWFULLY SERVICE'S UNDER
THE FLORIDA LAWS.

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TALLAHASSEE FLORIDA

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VECTOR E. BOYD Name and Title: PRESIDENT

Address: 140 OLD FEDERAL COURT - QUINCY FLORIDA 32351 Address: _____

Name and Title: KATENA M. BOYD Name and Title: V. PRESIDENT

Address: 140 OLD FEDERAL COURT - QUINCY FLORIDA 32351 Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(cont.)

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:

EMANUEL SAAP

Address:

821-2ND STREET
QUENY, FL 32351

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name:

L. Victor E. Boyd

Address:

140 SIA FEDERAL COURT
QUENY, FL 32351

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

10-12-2015
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.


Required Signature/Incorporator

10-12-2015
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
FILED