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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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effective water 11-2-15

2015 NOV -6 PH 12: 08
SECRETARY OF STATE
TALLAHASSEE, FLORID.

NOV 1 8 2015

COVER LETTER

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

SUBJECT:					
	(PROPOSED CORPORA	TE NAME - <u>MÚST INCL</u>	<u>UDE SUFFIX</u>)		
Enclosed are an orig	ginal and one (1) copy of the ar	icles of incorporation and	d a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED		
FROM:	JBEN D. TORO				
	Nam	e (Printed or typed)			
790	I KINGSPOINTE PKWY STE. 31				
	Address				
OR	LANDO FL 32819				
	City	State & Zip			
407	7-370-6445				

NALVA'S CLEANING SERVICES OF ORLANDO INC.

rubencpa@bellsouth.net

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

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

November 2, 2015

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE FL 32314

Dear Sir/Madam:

The purpose of this letter is to inform you that as the officer and shareholder of the Florida Corporation NALVA'S CLEANING SERVICES OF ORLANDO INC., (Document Number: P10000018547), that was administratively dissolved on 09/25/2015, I am releasing the name of this corporation to be used in a new filing.

I am enclosing Article of incorporation and the related fees for the new filing for NALVA'S CLEANING SERVICES OF ORLANDO INC., with the address 525 Parrish Ave., Orlando FL 32835

If you have any questions regarding this filing please call me at (407) 370-6445.

Sincerely,

Marinalva B. Wallauer, President

		• •	
•			P.S. (Profit)
	ARTICLES OF INC	ORPORATION	OISNOT
RTICLE I NAME	in comphance with Chapter 607 and	a/or Chapter 621, t	F.S. (Profit)
e name of the corpora	NALVA'S CLEANING SERV	VICES OF ORLAN	NDO INC.
<u>RTICLE II PRINC</u> 25 PARRISH AVE.	CIPAL OFFICE Principal street address		Mailing address, if different is:
RLANDO FL 32835			
RTICLE III PURPE e purpose for which t	OSE TO PROVI	DE RESIDENTIA	L AND COMMERCIAL CLEANING
ERVICES			EFFECTIVE DATE
			11-2-15
	· · · · · · · · · · · · · · · · · · ·		
e number of shares of	AL OFFICERS AND/OR DIRECTORS MARINAL VA B. WALLALIER, DRT.		GILBERTSON B. BORDIGNON DS
e number of shares of RTICLE V INITIA Name and Title	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE	_ Name and Title	GILBERTSON B. BORDIGNON DS: 525 PARRISH AVE.
e number of shares of	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE		·
e number of shares of RTICLE V INITIA Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE. ORLANDO FL 32835	_ Name and Title _ Address: _	525 PARRISH AVE. ORLANDO FL 32835
e number of shares of ETICLE V INITIA Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE. ORLANDO FL 32835	_ Name and Title _ Address: Name and Title	525 PARRISH AVE. ORLANDO FL 32835
e number of shares of RTICLE V INITIA Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE. ORLANDO FL 32835	_ Name and Title _ Address: Name and Title	525 PARRISH AVE. ORLANDO FL 32835
Name and Title Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE. ORLANDO FL 32835	_ Name and Title _ Address: Name and Title _ Address:	525 PARRISH AVE. ORLANDO FL 32835
Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE. ORLANDO FL 32835	_ Name and Title _ Address: Name and Title _ Address: Name and Title	525 PARRISH AVE. ORLANDO FL 32835
RTICLE V INITIA Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS MARINALVA B. WALLAUER, DPT 525 PARRISH AVE. ORLANDO FL 32835	_ Name and Title _ Address: Name and Title _ Address: Name and Title	525 PARRISH AVE. ORLANDO FL 32835

Name a	nd Title:	Name and Title:
Addres		Address:
	REGISTERED AGENT	
The <u>name and I</u>	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	MARINALVA B. WALLAUER	
Address:	525 PARRISH AVE.	_
	ORLANDO FL 32835	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	address of the Incorporator is:	
	RUBEN D. TORO	
Name:		_
Address:	7901 KINGSPOINTE PKWT STE. 31	_
	ORLANDO FL 32819	
Effective date, it	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and cannot be specifically and cannot be specific and cannot be spe	(OPTIONAL) not be more than five business days prior or 90 business
days after the f		
	e inserted in this block does not meet the applicable effective date on the Department of State's records	e statutory filing requirements, this date will not be listed as
Having been na this certificate, l	med as registered agent to accept service of proce am familiar with and accept the appointment as r	ss for the above stated corporation at the place designated in egistered agent and agree to act in this capacity
marin	ela Wallang	11/02/2015
	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein ar Department of State constitutes a third degree felo	e true. I am aware that the false information submitted in a
uotumem w me	Deput mem vi State constitutes à intra degree fett	
	AN hust Town	11/02/2015
Requ	ired signature/Inc/rporator	Date

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