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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 16 2015
S. GILBERT

COVER LETTER

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

SUBJECT: DEVON CLEANERS II, 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: AKBAR SIDDIQKARA
Name (Printed or typed)

17640 SW 154TH PLACE,
Address

MIAMI, FLORIDA 33187
City, State & Zip

305-496-4034
Daytime Telephone number

ASIDDIQKARA@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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be: DEVON CLEANERS II, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
17640 SW 154TH PLACE	17640 SW 154TH PLACE
MIAMI, FLORIDA 33187	MIAMI, FLORIDA 33187

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: FOR THE PURPOSE OF OPERATING BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: AKBAR SIDDIQKARA, PRESIDENT	Name and Title: GABY C. SUAREZ, VICE PRESIDEN
Address: 17640 SW 154TH PLACE MIAMI, FLORIDA 33187	Address: 17640 SW 154TH PLACE MIAMI, FLORIDA 33187
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: AKBAR SIDDIQKARA

Address: 17640 SW 154TH PLACE

MIAMI, FLORIDA 33187

ARTICLE VII INCORPORATOR

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

Name: AKBAR SIDDIQKARA

Address: 17640 SW 154TH PLACE

MIAMI, FLORIDA 33187

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JANUARY 1, 2016. (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

_____ 12-03-2015

Required Signature/Registered Agent 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.

_____ 12-03-2015

Required Signature/Incorporator Date