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KRISJOENNA
Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : KRISJOENNA SERVICES, INC.
Account Number : I20080000033
Phone : (305) 644-3055
Fax Number : (305) 644-3052

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Kjeservices@yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION
K & I, CLEANING SERVICES, INC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$70.00 |

COVER LETTER

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

SUBJECT: K & J CLEANING 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: KERIN MENCAS

Name (Printed or typed)

2145 SW 50 AVE

Address

FORT LAUDERDALE, FL 33317

City, State & Zip

954-638-8891

Daytime Telephone number

KJESERVICES@YAHOO.COM

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

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit).

SECRETARY OF STATE
TALLAHASSEE FLORIDAARTICLE I NAME

The name of the corporation shall be:

K & I Cleaning, Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address

Mailing address, if different is:

2145 SW 50 AVE

2145 SW 50 AVE

FORT LAUDERDALE, FL 33317

FORT LAUDERDALE, FL 33317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL PURPOSE

ARTICLE IV SHARES

100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KERIN MENCAS

Name and Title:

President.

Address 2145 SW 50 AVE

Address:

2145 SW 50th Ave

FORT LAUDERDALE

Fort Lauderdale

FL, 33317

FL, 33317

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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Name and Title: _____ Name and Title: SECRETARY OF STATE
TALLAHASSEE FLORIDA
Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: KERIN MENCIAS
Address: 2145 SW 50 AVE
FORT LAUDERDALE, FL 33317

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: KERIN MENCIAS
Address: 2145 SW 50 AVE
FORT LAUDERDALE, FL 33317

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 04/11/2016, (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

Kerin Mencias 04/11/2016
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.317.155, F.S.

Kerin Mencias 04/11/2016
Required Signature/Incorporator Date