

PI600054656
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000158319 3)))



H160001583193ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

RECEIVED

16 JUN 29 PM 4:40

TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
T-N-T PRESSURE CLEANING 1 CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

FILED

16 JUN 29 AM 9:24

FILED

M16000+58319

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

ARTICLE I NAME: The name of the corporation is:

T-N-T Pressure Cleaning 1 Corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

13727 SW 152 ST Box 314
MIAMI FL 33177

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Anthony Herrera (P)
Anthony Herrera (VP)
Keith J COLVIN (S)
RYAN Herrera (T)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Anthony Herrera
13727 SW 152 ST Box 314
MIAMI FL 33177

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Anthony Herrera
13727 SW 152 ST Box 314
Miami FL 33177

M16000158319

05/29/2016 15:15

3052201440

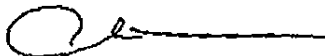
LAZARUS

PAGE 03/03

H16000158319

Required Signatures:

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



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.



Incorporator

Date

H16000158319