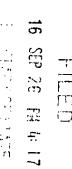
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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C. GOLDEN SEP 2 6 2016

CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

]	CERTIFIED COPY		
₹	РНОТОСОРУ		
	CUS		
\$	FILING Joc.		
(0	Bella Interior & Cleaning CORPORATE NAME AND DOCUMENT #)	, Inc.	
(0	CORPORATE NAME AND DOCUMENT #)		
(0	CORPORATE NAME AND DOCUMENT #)	SEP 26	
((CORPORATE NAME AND DOCUMENT #)		•
(0	CORPORATE NAME AND DOCUMENT #)		·
	CORPORATE NAME AND DOCUMENT #)		

COVER LETTER

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16 SEP 28 FX 4: 17

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

0×10×100	Rolla	Interior	E	Clean	inat	Inco
SORTECL: -	TRUCK.	(PROPOSED CORPOR	ATE	NAME - MUS	TINCHIDI	STIEFIX
		(LVOLOSED COKLOL	CLLD	TANKATE - TALOR	<u>, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,</u>	JUURILA)

FROM: Bella Interior & Cleaning, Inc. Name (Printed or typed)
5515 118+N 5+. LOT 153
Jacksonville, Fl. 31244 City/State & Zip
(904) 444 - 3577 Daytime Telephone number
COland Michelle 42 Damil. 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)

ARTICLE I NAME The name of the corporation shall be: Bella In	terior & Cleaning Inc. 5
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
5515 118+17 St. Lot 153 1acksonuille, Fl. 32244	198 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	ruice S
ARTICLE IV SHARES The number of shares of stock is:/	 -
Name and Title: Michelk Rolar	nd Name and Title: President
Address 5515 118th St. Lotio	
Name and Title:	Name and Title:
Address	
Name and Title:	Name and Title:
Address	

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable)	e) of the registered agent is:
Name: Michelle Roland	,,
Address: 55/5/18th St. Lot	<u>15</u> 3
poksonville, tr. 326	元
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: <u>Michelle Coland</u>	
Address: 6515 118th St. LO	F 153
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	(OPTIONAL)
(If an effective date is listed, the date must be specific and ca days after the filing.)	nnot be more than five business days prior or 90 business
Note: If the date inserted in this block does not meet the applicathe document's effective date on the Department of State's recon	ble statutory filing requirements, this date will not be listed as ds.
Having been named as registered agent to accept service of pro this certificate, I am familiar with and accept the appointment as	
Required Signature/Registered Agent	$\frac{9-26-16}{Date}$
I submit this document and affirm that the facts stated herein	
document to the Department of State constitutes a third degree for the Rolan	D 9-26-16
Required Signature/Incorporator	Date