Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617~6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000<del>0000</del>19

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: |  |  |
|-------|----------|--|--|
|       |          |  |  |

## FLORIDA PROFIT/NON PROFIT CORPORATION HONEY CLEANING SERVICE M&I, INC

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

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NOV 08 2016

## ARTICLES OF INCORPORATION H 160 0 0 2 7 48 13

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

| ARTICLE 1 NAME: The name of the corporation is:      |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|
| Honey cleaning service MYT, Inc                      |  |  |  |  |  |  |  |  |  |  |
| ARTICLE II PRINCIPAL OFFICE:                         |  |  |  |  |  |  |  |  |  |  |
| The principal street address and mailing address is: |  |  |  |  |  |  |  |  |  |  |
| Miami Gardens FL 33055                               |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

| ARTICLE IV | INITI | AL DIRECT | ORS AND/OR OFFI | CERS:  |             |   |
|------------|-------|-----------|-----------------|--------|-------------|---|
| Milagros   | De.   | 19        | Caridad         | Riesco | valde       | S |
|            | Pres  | ident'    | )               |        | _           |   |
|            |       |           |                 |        | -           |   |
|            |       |           | _               |        | 16 <b>₹</b> |   |
|            |       |           |                 | 300    | , OV -      |   |
|            |       |           |                 |        | - 7         |   |

SHARES: The number of shares of stock is: 100

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

Milagros De La Caridad Riesco valdes

4955 NW 199 ST LO+ 250

Miami Gardens FL 33055

Milagros De La Caridad Riesco Valdes

4955 NW 199 ST Lot 250

Miami Gardens FL 33055

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## 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

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 \$/817.155, F.S.

Incorporator

16 NOV -7 PM 4: 25