PM000014358

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Office Use Only				

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COVER LETTER

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

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JANI TORIAL SUBJECT:

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

Filing Fee & Certificate of Status

\$78.75

3 \$78.75	\$87.50			
Filing Fee	Filing Fee,			
& Certified Copy	Certified Copy			
	& Certificate of			
	Status			
ADDITIONAL COPY REQUIRED				

iLTOR FROM: Name (Printed or typed)

NA

NENEY State & Zio

850 - 284-1628 Daytime Telephone number

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

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

ARTICLES OF INCORPORA In compliance with Chapter 607 and/or Chapter	
ARTICLE I NAME The name of the corporation shall be: NOAH JANITON	ial SERVICE INC.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different ls:
140 DID FEBERAL COUNT	
QUENCY, Flor= DA 32351	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
RESTAENTER AND COMMENCE	n/ JANitor; al
SERVECE ALSO BUILDENG	MASNIENTENTE
And INDUSTRIES CLEANEN	9
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ARTICLE IV SHARES The number of shares of stock is: 100	
	AM 11:38
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
	ind Title: Massellen!
Address 140 DID FEDERAL LT, Address Dugula, Plantha 32351	S 140 OIA FEDERAL
(Coc 110 110 1 - 2000)	gurne ff innest
1/1 Too & And	1 A it
	nd Title: I. IRESCITEN
into and Chille	IGII TIN VENTRA
Name and Title: <u>140 DID</u> Value a Address <u>140 DID</u> FEDERAL LAddress	s: <u>TO UP (EDCTAR</u>
110 pit Chard It	QUENCY, FORTO
110 pit Chard It	QUENCY, FORFOR
Address <u>140 DIN FEDERAL UT</u> Address QVENLY, GORDA 3235	s: <u></u>

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Name and Titl	c:	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:

Address:

ANTORIA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

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 cannot be more than five days prior or 90 days after the filing.)

<u>Note:</u> 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

02 - 15 - 2017 Date

, rn

Required Signature/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 s.817.155, F.S.

Required Signature/Incorporator

07-15-2017 Date

Victor E. Boyd Noah's Janitorial Service, Inc. 140 Old Federal Court Quincy, FL 32351

February 15, 2017

State of Florida Department of State Division of Corporations

Dear Division:

Victor E. Boyd do not wish to use the business name of NOAH'S JANITORIAL SERVICE, INC.

Sincerely, Witter to Buyto Victor E. Boyd

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PM000014358

Victor E. Boyd Noah's Janitorial Service, Inc. 140 Old Federal Court Quincy, FL 32351

February 15, 2017

State of Florida Department of State Division of Corporations

Dear Division:

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Sincerely Witter & Burgh Victor E. Boyd

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