

P17000016669

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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V HERRING  
FEB 22 2017

W17-13496

## COVER LETTER

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

**SUBJECT:** SUPER CLEAN ENTERPRISE, 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:** CESAR ESPINOSA  
\_\_\_\_\_  
Name (Printed or typed)  
  
25050 SW 134th AVE #214  
\_\_\_\_\_  
Address  
  
HOMESTEAD, FL 33032  
\_\_\_\_\_  
City, State & Zip  
  
7865253288  
\_\_\_\_\_  
Daytime Telephone number  
  
cecarrera87@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 1, 2017

CESAR ESPINOSA  
25050 SW 134TH AVE #214  
HOMESTEAD, FL 33032

SUBJECT: SUPER CLEAN, INC.  
Ref. Number: W17000009195

We have received your document for SUPER CLEAN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 817A00002020



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 15, 2017

CESAR ESPINOSA  
25050 SW 134TH AVE #214  
HOMESTEAD, FL 33032

SUBJECT: SUPER CLEAN ENTERPRISE, INC.  
Ref. Number: W17000013496

We have received your document for SUPER CLEAN ENTERPRISE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 417A00003046

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

SUPER CLEAN ENTERPRISE, INC.

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

25050 SW 134TH AVE #214

Mailing address, if different is: \_\_\_\_\_

HOMESTEAD, FL 33032

**ARTICLE III PURPOSE**

TO OFFER COMMERCIAL AND RESIDENTIAL

The purpose for which the corporation is organized is: \_\_\_\_\_

CLEANING SERVICES.

**ARTICLE IV SHARES**

100

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CESAR ESPINOSA P

Name and Title: DAYLIANA DELGADO VP

Address 25050 SW 134TH AVE #214

Address: 25050 SW 134TH AVE #214

HOMESTEAD, FL 33032

HOMESTEAD, FL 33032

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ 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: \_\_\_\_\_  
CESAR ESPINOSA

Address: \_\_\_\_\_  
25050 SW 134TH AVE #214

\_\_\_\_\_  
HOMESTEAD, FL 33032

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: \_\_\_\_\_  
DAYLIANA DELGADO

Address: \_\_\_\_\_  
25050 SW 134TH AVE #214

\_\_\_\_\_  
HOMESTEAD, FL 33032

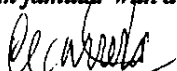
**ARTICLE VIII EFFECTIVE DATE:** 02/11/2017

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.)

**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*



02/11/2017

\_\_\_\_\_  
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.817.155, F.S.*



02/11/2017

\_\_\_\_\_  
Required Signature/Incorporator

\_\_\_\_\_  
Date