

P18000046148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/21/18--01001--008 **50.00

05/21/18--01001--009 **20.00

18 MAY 18 PM 4:24

COVER LETTER

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

SUBJECT: Make It Clean Services
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Monica Simmons-Feagin
Name (Printed or typed)

3783 New Flanzer Rd #17
Address

Laurel Hill FL 32567
City, State & Zip

(850) 421-3910 (351) 343-7432
Daytime Telephone number

monicafeaginsimmons@gmail.com
E-mail address: (to be used for future annual report notification)
miss-cleaner350@yahoo.com

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: Make It Clean Services Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

~~3783~~ 3783 New Ebenezer Rd
#17 Laurel Hill Fl 32827

3783 New Ebenezer Rd
Laurel Hill Fl 32827

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Organization Incorp.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Monica Simmons-Feagin Name and Title: President

Address

3783 New Ebenezer Rd
Laurel Hill 32827

Address:

same

Name and Title:

John Feagin Jr.

Name and Title:

Vice President

Address

3783 New Ebenezer Rd
#17

Address:

same

Laurel Hill Fl 32827

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:

~~Mate It Clean Services~~ Monica Simmons-Feagin

Address:

3783 New Ebenezer Rd
Laurel Hill FL 32827

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

~~Mate It Clean Services~~ Monica Simmons-Feagin

Address:

3783 New Ebenezer Rd
Laurel Hill FL 32827

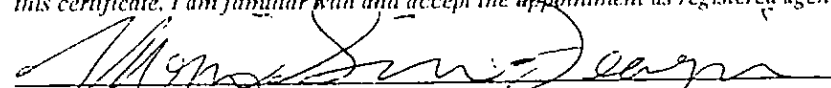
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: ~~RECEIVED~~ (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


Required Signature/Registered Agent

5-18-18

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.


Required Signature/Incorporator

5-18-18

Date