

P18000095463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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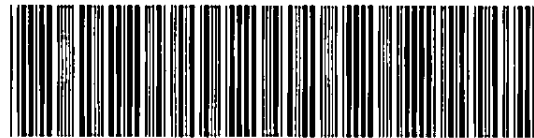
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 OCT 17 AM 8:46
SECRETARY OF STATE
HONOLULU, HI 96813

NOV 26 2018
C Kinsey

COVER LETTER

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

SUBJECT: Sandra New Way Cleaning Services 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: Katherine Zuniga
Name (Printed or typed)
1393 SW 10th St.
Address
Miami FL 33135
City, State & Zip
1-786-923-6614
Daytime Telephone number
evangelistapalacios@comcast.net
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: Sandra New Way Cleaning Services Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1393 SW 10th Street
Miami FL 33135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and Lawful Business

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CLERK OF DISTRICT COURT
MIAMI, FL 33135

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Katherine Zuniga Figueroa Name and Title: (Pres.)

Address: 1393 SW 10th St Address: _____
Miami, FL 33135

Name and Title: Sandra Yaneth Figueroa Zuniga Name and Title: (Vise Pres.)

Address: 1393 SW 10th St Address: _____
Miami, FL 33135

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: Evangelista Palacios
Address: 4657 SW 10th St.
Miami, FL 33135

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Katherine Zuniga Figueroa
Address: 1393 SW 10th Street
Miami, FL 33135

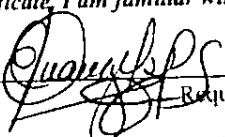
ARTICLE VIII EFFECTIVE DATE:

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.)

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

10/10/18
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.

x Katherine Zuniga
Required Signature/Incorporator

10/10/18
Date