

P1900007081

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 07535000353
Phone : (800)221-2972
Fax Number : (718)889-7420

****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
D & N CLEAN & CARE SERVICES CORP**

Certificate of Status	0
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Page Count	01
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J DENNIS

SEP 17 2019

19 SEP 16 PM 9:27

20 SEP 16 AM 1:00

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: D & N CLEAN & CARE SERVICES CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8915 RAMBLE WOOD DR, STE 2212

8915 RAMBLE WOOD DR, STE 2212

CORAL SPRINGS, FL 33071

CORAL SPRINGS, FL 33071

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CLEANING SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NADINE L FFRENCH - DIRECTOR

Name and Title: _____

Address 8915 RAMBLE WOOD DR, STE 2212

Address: _____

CORAL SPRINGS, FL 33071

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

13 SEP 16 AM 9:27

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: NADINE L FFRENCH
Address: 8915 RAMBLE WOOD DR, STE 2212
CORAL SPRINGS, FL 33071

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: NADINE L FFRENCH
Address: 8915 RAMBLE WOOD DR, STE 2212
CORAL SPRINGS, FL 33071

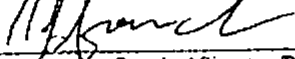
ARTICLE VIII EFFECTIVE DATE:

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.

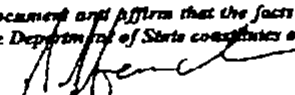
Having been named as registered agent to accept service of process for the above stated corporation as the place designated in this certificate, I do hereby with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

09/16/2019

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

09/16/2019

Date