

From: Robert Fanjul
10/11/2019

Fax: 18775036086

To:

Fax: (850) 617-6381

Page: 1 of 3

10/11/2019 1:59 PM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000303022 3)))



H190003030223ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : FANJUL ENTERPRISES LLC
Account Number : I201900000080
Phone : (305)603-8791
Fax Number : (877)503-6086

****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
Y&Y SMART CLEANING SERVICES CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 OCT 11 PM 1:03

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 14 2019

T. SCOTT

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: Y&Y SMART CLEANING SERVICES CORP**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address
6880 HARDING AVENUE APT 4MIAMI BEACH, FL 33141

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: YOINICER GOMEZ-PAddress: 6880 HARDING AVENUE APT 4
MIAMI BEACH, FL 33141Name and Title: YERENNIS TELLEZ-VPAddress: 6880 HARDING AVENUE APT 4
MIAMI BEACH, FL 33141

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2019 OCT 11 PM 1:09
SECRETARY
TALLAHASSEE, FL 32301

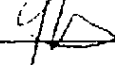

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: YOINICER GOMEZAddress: 6880 HARDING AVENUE APT 4MIAMI BEACH, FL 33141**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: YOINICER GOMEZAddress: 6880 HARDING AVENUE APT 4MIAMI BEACH, FL 33141**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*A 
Required Signature/Registered Agent10/11/19
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.*P 
Required Signature/Incorporator10/11/19
Date