

P19000.8271C

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

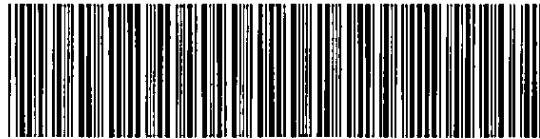
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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## COVER LETTER

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

**SUBJECT:** FRESH AND KLEAN MOBILE DETAILING 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  
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:** KIAN德拉 L. NICHOLS-CHARLES

\_\_\_\_\_  
Name (Printed or typed)

5131 NW 29th AVE.

\_\_\_\_\_  
Address

MIAMI, FL. 33142

\_\_\_\_\_  
City, State & Zip

305-770-8792

\_\_\_\_\_  
Daytime Telephone number

taylerkiersten@yahoo.com

\_\_\_\_\_  
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: FRESH AND KLEAN MOBILE DETAILING INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

5131 NW 29th AVE.

SAME

MIAMI, FL. 33142

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS PERTAINING TO THE  
WASHING AND FULL DETAILING OF AUTOMOTIVE AND MARINE VEHICLES/VESSELS.

**ARTICLE IV SHARES**

The number of shares of stock is: 100 PAR SHARES

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

Name and Title: KIANDRA L. NICHOLS-CHARLES(CEO)

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

Address 5131 NW 29th AVE.

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

MIAMI, FL. 33142

Name and Title: DE'ANTE M. REED (VP)

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

Address 5131 NW 29th AVE.

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

MIAMI, FL. 33142

Name and Title: JOHN A. DAVIS (SEC)

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

Address 1755 NW 109th ST.

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

MIAMI, FL. 33167

Name and Title: KIANDRA L. NICHOLS-CHARLES Name and Title: \_\_\_\_\_  
Address: 5131 NW 29th AVE. Address: \_\_\_\_\_  
MIAMI, FL. 33142 \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: KIANDRA L. NICHOLS-CHARLES  
Address: 5131 NW 29th AVE.  
MIAMI, FL. 33142

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: KIANDRA L. NICHOLS-CHARLES  
Address: 5131 NW 29th AVE.  
MIAMI, FL. 33142

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TALLAHASSEE, FL

**ARTICLE VIII EFFECTIVE DATE:**

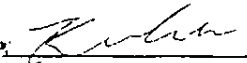
Effective date, if other than the date of filing: 10/16/2019

(OPTIONAL)

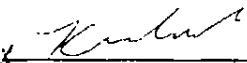
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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*

x  10/16/2019  
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.*

x  10/16/2019  
Required Signature/Incorporator Date