3052201440

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.

(((H21000364224 3)))



H210003642243ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:	Dividadas at to	11
	Division of Corporations	/
	Fax Number : (850)617-6381	ZAZ
From:	779	
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number : I20000000019	::
	Phone : (305)552-5973	
	Fax Number : (305)675-5944	3 - C
	:	
**Enter	the email address for this business entity to be used for fut	n ure
ลก	nual report mailings. Enter only one email address please.**	
· Em	ail Address:	
•		

FLORIDA PROFIT/NON PROFIT CORPORATION FIRE CLEAN PROS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION .

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:		
Fire Clean Pros, Inc.		
ARTICLE II PRINCIPAL OFFICE;		
The principal street address and mailing address is:		
995 N. Galdenrod Rd		
Suite B		
Mando, F1. 32807		
ARTICLE III SHARES: The number of shares of stock is: 100	۰	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
Carolina Brito - President		
S	202	
ALC C	2021 SEP 29	e-20
	29	Case
မ်ားကို မေးကို မေးက မေးကို မေးကို မေးကိ	PN 10:	2 4 24 24 44
ADMONDA - INITIAL DECICHEDED ACERT AND STREET INDIFFICE.	0։ շկ	- 42
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is	5:	
995 N. Golden and Rd. Carolina Brito		
Suite B		
Oclando, F). 32807		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is	i.	
Carolina Brito		
995 N. Gilderrod Rd.		
Orthodo 6 32807		

Required Signatures:

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

Registered Agent 9-27-21

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.

Under hold 9-27-21

Incorporator Date

2021 SEP 29 PM 10: 24 SECRETAINY OF STATE