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Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : FASTKIT CORP Account Number : 120100000009

Phone

: (305)599-0839

Fax Number

: (305)592-9591

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

FLORIDA PROFIT/NON PROFIT CORPORATION 4D PERFECT CLEANER CORP.

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ARTICLES OF INCORPORATION

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

OF

4D PERFECT CLEANER CORP.

The undersigned incorporator (s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLES I NAME

The name of the corporation shall be:

4D PERFECT CLEANER CORP.

ARTICLES II PRINCIPAL OFFICE

The principal of place of business /mailing address is:

9923 W. OKEECHOBEE RD STE 111 HIALEAH GARDENS, FL 33016

ARTICLES III PURPOSE

The purpose for which the corporation is organized is:

CLEANING AND MAINTENANCE
THIS CORPORATION MAY ENGAGE IN ANY LEGISTIMATE BUSINESS ACTIVITIES
PERMITTED UNDER THE LAWS OF THE UNITED STATES, AND LAWS OF THE
STATE OF FLORIDA, INCLUDING ALL OF THE ABOVE BUT NOT LIMITED TO THE
SAME.

ARTICLES IV CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any given time is:

100 SHARES FOR \$ 5.00 PER SHARE = TOTAL \$ 500.00 NOMINAL PAR VALUE

ARTICLES V INITIAL OFFICERS/DIRECTORS (Optional)

RAMON ANTONIO CIPRIAN PRESIDENT/DIRECTOR 9923 W. OKEECHOBEE RD STE 111 HIALEAH GARDENS, FL 33016 2022 15.7 16 AH 10: 24

ARTICLES VI	REGISTERED	ACENT
		WATTI

The Name and Florida address of the Registered Agent is:

RAMON ANTONIO CIPRIAN 9923 W. OKEECHOBEE RD STE 111 HIALEAH GARDENS, FL 33016

	HIALEAH GARDENS, FL 33016				
	ARTICLES V	711	INCORPORATOR(S)		
The N	ame and Florida address	of the Incorpo	orator (s) is/are:		
	9923 V	ION ANTON V. OKEECHOB LEAH GARDE	EE RD STE 111		
corpor	g been named a registere ation at the designed in t timent as registered agen	his certificate t and agree to		=	
Signat	ure Registered Agent	·	DATE: 05/14/2022		
******	***************	*********	************************		
aware	that the false informati	on submitted	facts stated herein are true. I am in a document to the Department of ovided for in s.817.155, F.S.		
this_	/	MAY	2022		
Signat	ture /-Incorporator				
Signat	ture / Incorporator		· .	1	

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