

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.

(((H22000175043 3)))



H220001750433ABCY

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 : WF TAXES AND MORE INC.

Account Number : I20200000043 : (772)879-0010 Fax Number : (772)879-0150

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 J & J CLEANING FL SERVICES INC

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$78.75 |

Electronic Filing Menu

Corporate Filing Menu

Help

To: +18506176381

٠,



COVER LETTER

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

SUBJECT: J & J CLEANING FL SERVICES INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

& Certificate of Status

\$78.75

□ \$87.50

Filing Fee

Filing Fee.

& Certified Copy

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

| FROM: _ | JUANA ALVAREZ | | | |
|---------|--|--|--|--|
| | Name (Printed or typed) | | | |
| | 690 SW EMPIRE ST | | | |
| - | Address | | | |
| | PORT ST LUCIE, FL 34983 | | | |
| | City, State & Zip | | | |
| | 786-306-3192 | | | |
| | Daytime Telephone number | | | |
| | WFTAXES.MORE@GMAIL.COM | | | |
| - | E mail address: (to be used for future annual report potification) | | | |

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)

| D SW EMPIRE ST | | Mailing : | ailing address, if different is: | |
|--|--|---|----------------------------------|--|
| ORT ST LUCIE, FL | 34983 | | | |
| | · | | | |
| TICLE III PURP e purpose for which | OSE the corporation is organized is:AN | Y AND ALL LEGAL BUSINESS | | |
| | | | | |
| | | | | |
| | | | | |
| TICLE IV SHAF |) FC | | | |
| | | | | |
| e number of shares o | f stock is: 100 | | | |
| e number of shares o | f stock is: 100 | | | |
| | f stock is: 100 AL OFFICERS AND/OR DIRECTORS | | | |
| TICLE V INITI | | | | |
| TICLE V INITI | AL OFFICERS AND/OR DIRECTORS | Name and Title | | |
| RTICLE V INITI | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT | Name and Title Address: | | |
| RTICLE V INITI | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST | Name and Title Address: | | |
| Name and Titl Address | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: | | |
| Name and Title Address Name and Title | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: | | |
| Name and Titl Address | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: | | |
| Name and Title Address Name and Title | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: | | |
| Name and Title Address Name and Title | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: | | |
| Name and Title Address Name and Title Address | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: Address: | | |
| Name and Title Address Name and Title Address | AL OFFICERS AND/OR DIRECTORS 1c: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: Address: Name and Title: | | |
| Name and Title Address Name and Title Address | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: Address: Name and Title: | 702 | |
| Name and Title Address Name and Title Address | AL OFFICERS AND/OR DIRECTORS Ic: JUANA ALVAREZ, PRESIDENT 690 SW EMPIRE ST PORT ST. LUCIE, FL 34983 | Name and Title. Address: Name and Title: Address: Name and Title: | 202 | |

| Name an | nd Title: | Name and Title: | |
|-------------------------------------|---|---|---|
| Address | | Address: | |
| | | | |
| | REGISTERED AGENT lorida street address (P.O. Box NOT acceptable | e) of the registered agent is: | |
| Name: | JUANA ALVAREZ | | |
| Address: | 690 SW EMPIRE ST | | |
| | PORT ST LUCIE, FL 34983 | | |
| <u>ARTICLE VII</u> | INCORPORATOR | | |
| The name and a | ddress of the Incorporator is: | | |
| Name: | WALTER GOMEZ | <u></u> | |
| Address: | 508 SW PORT ST, LUCIE BLVD. | <u></u> | |
| | PORT ST. LUCIE, FL 34983 | | |
| Effective date i | EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and ca | . (OPTIONAL) nanot be more than five days prior | or 90 days after the |
| Note: If the dat the document's | e inserted in this block does not meet the applic effective date on the Department of State's reco | able statutory filing requirements, thi ords. | s date will not be listed as |
| Having been na certificate, Lant | med as registered agent to accept service of proc Jamiliar with and accept the appointment as reg | ess for the above stated corporation at istered agent and agree to act in this | the place designated in the capacity |
| | my Herror | | 05/09/2022 |
| | Required Signature Registered Agent | | Date |
| I submit this do | ocument and affirm that the facts stated herein Department of State constitutes a third degree j | are true. I am aware that the faise felony as provided for in s.817.155, F | information submitted in S. |
| $ /$ Λ | Walth (som | | 05/09/2022 |
| Required Signa | ture/incorporator | Date | 2022 |
| | | | |
| | | | |
| | | | 717 MI |
| | | | |
| | | | |