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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
CLEANING ALFONSO SERVICES INC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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AS

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: CLEANING ALFONSO SERVICES INC**ARTICLE II PRINCIPAL OFFICE**Principal street address12361 SW 128th CT STE 200
MIAMI, FL 33186

Mailing address, if different is:

777 NW 72nd AVE STE 1068
MIAMI, FL 33126**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: SHARES: 100 @ \$1.00**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: HENDRI A. PEREZ HERNADEZ - P Name and Title: _____Address 12361 SW 128th CT STE 200 Address: _____
MIAMI, FL 33186

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: HENDRI A. PEREZ HERNADEZ
 Address: 12361 SW 128th CT STE 200
MIAMI, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: HENDRI A. PEREZ HERNADEZ
 Address: 12361 SW 128th CT STE 200
MIAMI, FL 33186

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

/s/ Hendri A. Perez Hernandez

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.

/s/ Hendri A. Perez Hernandez

Required Signature/Incorporator

 Date

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