

P23000004912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500399480675

FILED

23 JAN 23 AM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01/24/25--01002--00.00

RECEIVED

2023 JAN 23 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: CHER'S TOUCH OF CLASS RESIDENTIAL CLEANING SERVICE, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: CHERYLL EVANS
Name (Printed or typed)
5945 36TH STREET W. #F101
Address
BRADENTON, FL 34210
City, State & Zip
941-909-4028
Daytime Telephone number
cheryllefans89@yahoo.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32314

23 JAN 23 AM 2:35

FILED

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: CHER'S TOUCH OF CLASS RESIDENTIAL CLEANING SERVICE, INC

ARTICLE II PRINCIPAL OFFICE
Principal street address: 5945 36TH STREET W. #F101
BRADENTON FL 34210
Mailing address, if different is: SAME

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>CHERYLL EVANS, PRESIDENT</u>	Name and Title:	_____
Address	<u>5945 36TH STREET W. #F101</u> <u>BRADENTON, FL 34210</u>	Address:	_____

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

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

FILED
23 JAN 23 AM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: CHERYLL EVANS
Address: 5945 36TH STREET W. #F101
BRADENTON, FL 34210

ARTICLE VII INCORPORATOR

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

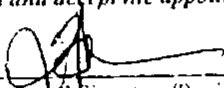
Name: CHERYLL EVANS
Address: 5945 36TH STREET, #F101
BRADENTON, FL 34210

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.


Required Signature/Registered Agent

FILED
23 JAN 23 AM 2:35
1/23/2023
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.


Required Signature/Incorporator

1/23/2023
Date

FILED

23 JAN 23 AM 2:35

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Full body:

at from my iPhone