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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : HUBCO
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Email Address: jagaccounting1@gmail.com

RECEIVED
2024 JUN 17 PM 2:10
COMMERCIAL
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
CONNIE Z CLEANING INC.

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

2024 JUN 17 PM 2:10

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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: CONNIE Z CLEANING INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
2012 ALTA MEADOWS LANE SUITE 108
DELRAY BEACH, FL 33444

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Legal & lawful Purpose

ARTICLE IV SHARES

The number of shares of stock is: 100 at No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TAYLOR BARNES - President/Director Name and Title: _____

Address 2012 ALTA MEADOWS LANE Address: _____
SUITE 108
DELRAY BEACH, FL 33444

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 AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: T. BARNESAddress: 2012 ALTA MEADOWS LANE SUITE 108DELRAY BEACH, FL 33444**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: TAYLOR BARNESAddress: 2012 ALTA MEADOWS LANE SUITE 108DELRAY BEACH, FL 33444**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 **T. BARNES**

June 17th, 2024

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 **TAYLOR BARNES**

June 17th, 2024

Date