P95000010697 TRANSMITTAL LETTER

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

> 100001899791 -02/07/95--01106--007 *****78.75 *****78.75

MAID OF HONOR CLEANING SERVICE (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check \$70.00 \$122,50 ิ|\$131.25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate FROM: Name (printed or typed) 1400 1/ 11-Age 81.10. # 619
Address LU. P. B. F. F. 13-3409 City, State & Zip 407 385-9699 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

SFER -6 PH 3: 23

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.

ARTICLE I NAME

The name of the corporation shall be: MAID OF HOND? CLEAN US SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1400 V HAGE BID. #649

ARTICLE III SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LICA TOMES
140 JUAGE BLO# 619
W.P. B. FIA 33409

ARTICLE V INCGOPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LISA TORRES 1400 VIHAGE BLOD #G19 W P.B, FIA 33409

The undersigned inc	orporator(s) has(have) executed	these Articles of Incorporation	this
118C	_day of	, 19 <u></u> 95	
	1100 TANKS		
	Signature		
-	Signature		

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OF A

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA OF THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS NATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF OPIDA.

1.	The name of the corporation is: MAID OF HONO CLEANING SERVICE, TAX
2.	The name and address of the registered agent and office is:
	LISA TOLLES
	(Name)

(Name)

1400 V.11098 BIJO # 619

(P.O. Box r.st acceptable)

(D. P. B. FIA - 33409

(City/State/Zin)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature) (Date)