D9800045377

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

SUBJECT: Care Cleaning Service Corp. (Proposed corporate name - must include suffix)				
•				
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :				
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Co	Filing Fee For Certificate & Certificate	
		ADDITIONAL	L COPY REQUIRED	
FROM: Elizabeth Arenas Bar 5 Name (Printed or typed)				
6820 NOVA DI BLDGG APTIOZ Address				
City, State & Zip				
Daytime Telephone number Elizabeth Greens GAVE				
			AUTHORIZATION BY PHONE TO CORRECT ATT Show	
			DATE S-20-98	
1	NOTE: Please provide the ori	ginal and one co	DOC FXAM P	

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICL	E I	NAME
The	-C+L-	

The name of the corporation shall be:

C.A.R.E. Cleaning Service Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 6820 Nova Drive Blog. 6 Apt # 102 Davie, Ha.33317

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: 6820 Nova Drive Bldg. 6 Apt. # 102 Davie, Fla. 33317

ElizABCTH AICHAS

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are: ElizABetH Arenss . 6820 Nova Drive Bldg. 6 Apt. # 102

Davie, F/a, 33317

SONAL MONO

(An additional article must be added if an effective date is requested.)

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 the appointment as registered agent and agree to act in this capacity. I further agree 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/Registered Agent