Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : KIJOENNA SERVICES INC

Account Number : 120080000033 Phone : (305)644-3055 : (305)644-3052 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	· '	<u></u>

FLORIDA PROFIT/NON PROFIT CORPORATION MG CLEANING INC

Certificate of Status Certified Copy 01 Page Count \$70.00 Estimated Charge

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Corporate Filing Menu

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COVER LETTER

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

erm mor.	MG CLEANING INC				
SUBJECT:	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	å check for:	 1	
Ø \$70.00 Filing Fec	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fec, Certified Copy & Certificate o Status PY REQUIRED		
FROM:	KIJOENNA SERVICES Name	S, INC (Printed or typed)	:		
_	2141 SW 1 ST SUI				
MIAMI, FL 33135 City, State & Zip					
	7864997132 Daytime Telephone number				
	otification)	1). 			

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 corpora	tion shall be: MG CLE	EANING INC	*	
ARTICLE II PRINC		<u> </u>	, -	address, if different is:
FORT LAUDERDALE	, FL 3331 <u>7</u>	<u> </u>	·	
ARTICLE III PURPO The purpose for which	<u>OSE</u> he corporation is organized is: _	ANY AN ALL LAV	VFULL BUSIŅE	ss
			···	
				
	<u>ES</u> 'stock is:100 <u>4L OFFICERS AND/OR DIREC</u> c:HERNANDEZ GALVEZ D		ind Title:	
Address	4124 SW 21ST APT 2			
	FORT LAUDERDALE FL 33	3317		2024 HA
Name and Title	:	Name &	and Title:	- 1
Address			:s:;_	FL SAIL
Name and Title	:	Name a	and Title:	
Address		Addres	55: <u>.</u>	
			············	

The name and address of the Incorporator is:	Name and Title:		Name and Title:		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: HERNANDEZ GALVEZ DEYME Address: 4124 SW 21ST APT 2 FORT LAUDERDALE ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: HERNANDEZ GALVEZ DEYME Address: 4124 SW 21ST APT 2 FORT LAUDERDALE ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 04/01/24 (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 us 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 the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Day The Hernands College O4/01/24 Required Signature/Registered Agent Date I submit this document and uffirm that the facts stated herein are true. I am aware that the false information submitted in	Address		Address:		
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: HERNANDEZ GALVEZ DEYME Address: 4124 SW 21ST APT 2 FORT LAUDERDALE The name and address of the Incorporator is: Name: HERNANDEZ GALVEZ DEYME Address: 4124 SW 21ST APT 2 FORT LAUDERDALE ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 04/01/24 (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 us 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 the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity ARTICLE VIII EFFECTIVE DATE: 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 us the document's effective date on the Department of State's records. Having been named as registered ugent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity ARTICLE VIII EFFECTIVE DATE: Od/01/24 Required Signature/Registered Agent of the place information submitted in					
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Name: HERNANDEZ GALVEZ DEYME Address: 4124 SW 21ST APT 2 FORT LAUDERDALE ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Nume: HERNANDEZ GALVEZ DEYME Address: 4124 SW 21ST APT 2 FORT LAUDERDALE ARTICLE VIII FFFECTIVE DATE: Effective date, if other than the date of filing: 04/01/24 (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 us 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 the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Day Me Hernands Calus 10 and accept the facts stated herein are true. I am aware that the false information submitted in	ARTICIE VI R	REGISTERED AGENT orido street address (P.O. Box NOT acceptable)	of the registered agent is:		
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The name and address of the Incorporator is: Name: HERNANDEZ GALVEZ DEYME Address: FORT LAUDERDALE ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 04/01/24 (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 us 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 the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Dayme Hernands Calva (04/01/24) 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		4124 SW 21ST APT 2			
Name: HERNANDEZ GALVEZ DEYME	71001 435.	FORT LAUDERDALE			
Name: HERNANDEZ GALVEZ DEYME Address: 4124 SW 21ST APT 2 FORT LAUDERDALE ARTICLE VIII EFFECTIVE DATE: DAYON (OPTIONAL) (If an effective date, if other than the date of filing: 04/01/24 (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 the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Day Me Hernander Galver Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in			_	2024	
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Effective date, if other than the date of filing:	,	FORT LAUDERDALE	 -	ATE 10	
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I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in	Dayn	re Hernander Galve	,	04/01/24	
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		Required Signature/Registered Agent	3	Date	
	I submit this document to the	ument and affirm that the facts stated herein a Department of State constitutes a third degree fel	ire true. I am aware that the falso lony as provided for in s.817.155, I	e information submitted in α F.S.	
Day me Hernandez Galves. Required Signature/Incorporator Date	Day me	2 Hernandez Galve	Date	04/01/24	