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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION

RULIZALI NURSERY, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION
OF

RULIZALI NURSERY, INC.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s)
Competent to contract, hereby form a corporation under the laws of State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is: RULIZALI NURSERY, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities permitted under
the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One hundred shares (100) of five Dollar (s)
(\$ 5.00) par value common stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and name of the at office is:

NAME	RUBEN FERNANDEZ				
ADDRESS	26101 SW 167 AVE				
CITY	HOMESTEAD	STATE	FL	ZIP	33031

The principal office, if known or the mailing address of the corporation is:

NAME	RUBEN FERNANDEZ				
ADDRESS	26101 SW 167 AVE				
CITY	HOMESTEAD	STATE	FL	ZIP	33031

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) director initially. The number of directors may be
either increased or diminished from time to time by - laws, but shall never be less than one (1).

The name and addresses of the initial director (s) of the corporation are as follows:

NAME	RUBEN FERNANDEZ	(PRESIDENT)
ADDRESS	26101 SW 167 AVENUE	
CITY	HOMESTEAD	STATE FL ZIP 33031
NAME	LIZ RABAZA	(VICE - PRESIDENT)
ADDRESS	26101 SW 167 AVENUE	
CITY	HOMESTEAD	STATE FL ZIP 33031
NAME		
ADDRESS		
CITY		
NAME		
ADDRESS		
CITY		
NAME		
ADDRESS		
CITY		

ARTICLE VII - INCORPORATORS

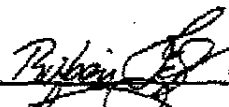
The name and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	RUBEN FERNANDEZ	(PRESIDENT)
ADDRESS	26101 SW 167 AVENUE	
CITY	HOMESTEAD	STATE FL ZIP 33031
NAME	LIZ RABAZA	(VICE - PRESIDENT)
ADDRESS	26101 SW 167 AVENUE	
CITY	HOMESTEAD	STATE FL ZIP 33031
NAME		
ADDRESS		
CITY		
NAME		
ADDRESS		
CITY		
NAME		
ADDRESS		
CITY		

IN WITNESS WHERE OF, the undersigned subscriber(s) have executed these Articles of Incorporation this 28TH AUGUST, 2006.

PREPARED: SOSA ACCOUNTING TAX SERVICE
570 EAST 49 STREET
HIALEAH, FL 33013

(305) 688 - 1716
(305) 688 - 1714

 (Seal)
 (Seal)
____ (Seal)
____ (Seal)
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**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

RULIZALI NURSERY, INC.

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, to organize under the laws of the State of Florida with its
registered office as indicated in the Articles of Incorporation.

AT: 26101 SW 167 AVENUE

HOMESTEAD, FL 33031

Has named RUBEN FERNANDEZ

Located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above state
corporation at the place designated in this certificate, and being familiar with the
obligations of that position, I hereby accept to act in this capacity, and agree to comply
with provisions of Florida Law in keeping open said office.


(registered agent)