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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I28000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

RECEIVED

16 JUL -5 AM 3:44

STATE OF FLORIDA
TALLAHASSEE, FLORIDAFLORIDA PROFIT/NON PROFIT CORPORATION
EMPIRE LAWN SERVICE, INC

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2ND REQUEST

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H16000160228

ARTICLE I NAME: The name of the corporation is:

Empire Lawn Service, Inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

116304 SW 103rd Ct

Miami FL 33157

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Benier Lopez

(P)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Benier Lopez

116304 SW 103rd Ct

Miami FL 33157

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Benier Lopez

116304 SW 103rd Ct

Miami FL 33157

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FILED

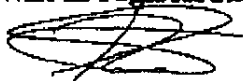
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Required Signatures:

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



Registered Agent

7/1/10

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.



Incorporator

7/1/10

Date

H16000160228