

P21 600028506

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
TROPICAL LAWNMOWERS #2 INC

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

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Handwritten signature and date: 3-31-21

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

ARTICLE I NAME

The name of the corporation shall be: TROPICAL LAWNMOWERS #2 INC

ARTICLE II PRINCIPAL OFFICE

Principal street address: 1550 NW 17th AVE
MIAMI, FL 33125
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: SHARES: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NELSON GONZALEZ - P Name and Title: _____

Address: 1550 NW 17th AVE Address: _____
MIAMI, FL 33125

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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CLERK OF DISTRICT COURT
MIAMI, FL

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: NELSON GONZALEZ
 Address: 1550 NW 17th AVE
MIAMI, FL 33125

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NELSON GONZALEZ
 Address: 1550 NW 17th AVE
MIAMI, FL 33125

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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 this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Nelson Gonzalez _____ 3/29/2021
 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 a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Nelson Gonzalez _____ 3/29/2021
 Required Signature/Incorporator Date