

**P22000044996**  
 Florida Department of State  
 Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**ENB TREE SERVICE MIRANDA, INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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 DIVISION OF CORPORATIONS  
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**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: ENB TREE SERVICE MIRANDA, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
10510 SW 41ST TERRACE

Mailing address, if different is:  
10510 SW 41ST TERRACE

MIAMI, FL 33165

MIAMI, FL 33165

**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: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: P: EDGAR I. MIRANDA LOPEZ

Name and Title: \_\_\_\_\_

Address 10510 SW 41ST TERRACE

Address: \_\_\_\_\_

MIAMI, FL 33165

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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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: EDGAR I. MIRANDA LOPEZ  
 Address: 10510 SW 41ST TERRACE  
MIAMI, FL 33165

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: EDGAR I. MIRANDA LOPEZ  
 Address: 10510 SW 41ST TERRACE  
MIAMI, FL 33165

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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 06/03/2022 (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*

X  06/03/2022  
 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.*

X  06/03/2022  
 Required Signature/Incorporator Date