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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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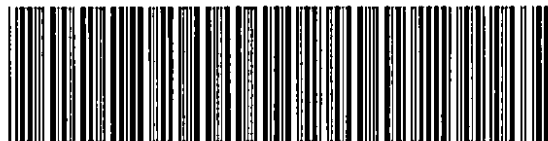
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/06/19--01013--015 **18.75

2019 NOV -6 PM 2:29

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: H2O IRRIGATION EXPERT INC
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARGARET DESANTIS
Name of Person
H2O IRRIGATION EXPERT INC
Firm/Company
22.42 102nd Street
Address
College Point NY 11356
City/State and Zip code
mdesantis@PACIFICLAWNSPRINKLERS.COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

MARGARET DESANTIS at (718) 312.3805
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. H2O IRRIGATION EXPERT INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. MASSACHUSETTS 3. _____

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. 08/17/2018 5. _____

(Date of incorporation)

(Date of duration, if other than perpetual)

6. _____

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 123 SKIFF LANE WEST TISBURY MA 02575

(Principal office address)

2242 134th Street College Point NY 11356

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

PATRICIA LANN SPRINKLERS INC.

Office Address:

1007 N. Federal Hwy Suite 1015

Fort Lauderdale

(City)

Florida

33304

(Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Stephen DeLaffiora

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: DIANE CANDIDO

Address: 123 SKIFF LANE WEST TISBURY, MA 02575

Vice President: Wendell Silva Souza

Address: 123 SKIFF LANE WEST TISBURY, MA 02575

Secretary: Wendell Silva Souza

Address: 123 SKIFF LANE WEST TISBURY, MA 02575

Treasurer: DIANE CANDIDO

Address: 123 SKIFF LANE WEST TISBURY, MA 02575

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____


Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. WENDELL SILVA SOUZA

(Typed or printed name and capacity of person signing application)



Commonwealth of Massachusetts
Department of Revenue
Christopher C. Harding, Commissioner
mass.gov/dor

Letter ID: L2015686528
Notice Date: October 28, 2019
Case ID: 0-000-440-630



CERTIFICATE OF GOOD STANDING AND/OR TAX COMPLIANCE



H2O IRRIGATION EXPERT INC
PO BOX 2353
VINEYARD HAVEN MA 02568-0919

Why did I receive this notice?

The Commissioner of Revenue certifies that, as of the date of this certificate, H2O IRRIGATION EXPERT INC is in compliance with its tax obligations under Chapter 62C of the Massachusetts General Laws.

This certificate doesn't certify that the taxpayer is compliant in taxes such as unemployment insurance administered by agencies other than the Department of Revenue, or taxes under any other provisions of law.

This is not a waiver of lien issued under Chapter 62C, section 52 of the Massachusetts General Laws.

What if I have questions?

If you have questions, call us at (617) 887-6400 or toll-free in Massachusetts at (800) 392-6089, Monday through Friday, 8:30 a.m. to 4:30 p.m..

Visit us online!

Visit mass.gov/dor to learn more about Massachusetts tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights, and MassTaxConnect for easy access to your account:

- Review or update your account
- Contact us using e-message
- Sign up for e-billing to save paper
- Make payments or set up autopay

Edward W. Coyle, Jr., Chief
Collections Bureau

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William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

Date: October 28, 2019

To Whom It May Concern :

I hereby certify that.

H2O IRRIGATION EXPERT INC

appears by the records of this office to have been incorporated under the General Laws of this
Commonwealth on **August 17, 2018.**

I also certify that so far as appears of record here, said corporation still has legal existence.

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In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

Certificate Number: 19100612590

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by:



The Commonwealth of Massachusetts
William Francis Galvin

Minimum Fee: \$250.00

Secretary of the Commonwealth, Corporations Division
One Ashburton Place, 17th floor
Boston, MA 02108-1512
Telephone: (617) 727-9640

Articles of Organization

(General Laws, Chapter 156D, Section 2.02; 950 CMR 113.16)

Identification Number: 001341772

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ARTICLE I

The exact name of the corporation is:

H2O IRRIGATION EXPERT INC

ARTICLE II

Unless the articles of organization otherwise provide, all corporations formed pursuant to G.L. C156D have the purpose of engaging in any lawful business. Please specify if you want a more limited purpose:

TO CONDUCT A BUSINESS OF PROVIDING IRRIGATION AND LANDSCAPE SERVICES TO THE PUBLIC; AND TO CARRY ON ANY BUSINESS WHICH MAY BE LAWFULLY CARRIED ON BY A CORPORATION ORGANIZED UNDER M.G.L. CHAPTER 156B, WHETHER OR NOT RELATED TO THOSE PURPOSES REFERRED TO IN THE FORGOING PARAGRAPH

ARTICLE III

State the total number of shares and par value, if any, of each class of stock that the corporation is authorized to issue. All corporations must authorize stock. If only one class or series is authorized, it is not necessary to specify any particular designation.

Class of Stock	Par Value Per Share Enter 0 if no Par	Total Authorized by Articles of Organization or Amendments		Total Issued and Outstanding <i>Num of Shares</i>
		<i>Num of Shares</i>	<i>Total Par Value</i>	
CNP	\$0.00000	1,000	\$0.00	1,000

G.L. C156D eliminates the concept of par value, however a corporation may specify par value in Article III. See G.L. C156D Section 6.21 and the comments thereto.

ARTICLE IV

If more than one class of stock is authorized, state a distinguishing designation for each class. Prior to the issuance of any shares of a class, if shares of another class are outstanding, the Business Entity must provide a description of the preferences, voting powers, qualifications, and special or relative rights or privileges of that class and of each other class of which shares are outstanding and of each series then established within any class.

OLDERS, SHARES HELD BY PERSONS RECEIVING SHARES IN THE INITIAL ISSUE OF STOCK I
N THIS CORPORATION MAY NOT BE RESOLD TO OTHER PERSONS UNLESS SUCH SHARES A
RE FIRST OFFERED TO THIS CORPORATION, AND, IF NOT SO PURCHASED, THEN TO THE OT
HER SHAREHOLDERS AT THE PRICE AND TERMS IDENTICAL TO THE PROPOSED SALE TO A
THIRD PERSON. THE RESTRICTIONS CONTAINED IN THIS ARTICLE V MAY BE MODIFIED BY
A SEPARATE WRITTEN AGREEMENT AMONG THE CORPORATION AND THE SHAREHOLDERS
RECEIVING SHARES IN THE INITIAL ISSUANCE

ARTICLE VI

Other lawful provisions, and if there are no provisions, this article may be left blank.

ANY CORPORATE MEETING MAY BE HELD WITHIN OR WITHOUT THE COMMONWEALTH OF
MASSACHUSETTS. THE CORPORATION MAY BECOME A PARTNER IN ANY BUSINESS ENTER
PRISE IN WHICH THE CORPORATION HAS THE POWER TO CONDUCT ITSELF

Note: The preceding six (6) articles are considered to be permanent and may be changed only by filing appropriate articles of amendment.

ARTICLE VII

The effective date of organization and time the articles were received for filing if the articles are not rejected within the time prescribed by law. If a *later* effective date is desired, specify such date, which may not be later than the 90th day after the articles are received for filing.

Later Effective Date: 8/17/2018 **Time:** 00:00 AM

ARTICLE VIII

The information contained in Article VIII is not a permanent part of the Articles of Organization.

a,b. The street address of the initial registered office of the corporation in the commonwealth and the name of the initial registered agent at the registered office:

Name: DAIANE CANDIDO

No. and Street: 123 SKIFF LANE

City or Town: WEST TISBURY

State: MA

Zip: 02575

Country: USA

c. The names and street addresses of the individuals who will serve as the initial directors, president, treasurer and secretary of the corporation (an address need not be specified if the business address of the officer or director is the same as the principal office location):

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
PRESIDENT	DAIANE CANDIDO	123 SKIFF LANE WEST TISBURY, MA 02575 USA
TREASURER	DAIANE CANDIDO	123 SKIFF LANE WEST TISBURY, MA 02575 USA
SECRETARY	WENDELL SILVA SOUZA	123 SKIFF LANE WEST TISBURY, MA 02575 USA

d. The fiscal year end (i.e., tax year) of the corporation:

December

e. A brief description of the type of business in which the corporation intends to engage:

IRRIGATION SERVICES

f. The street address (post office boxes are not acceptable) of the principal office of the corporation:

No. and Street: 123 SKIFF LANE

City or Town: WEST TISBURY

State: MA

Zip: 02575

Country: USA

g. Street address where the records of the corporation required to be kept in the Commonwealth are located (post office boxes are not acceptable):

No. and Street: 123 SKIFF LANE

City or Town: WEST TISBURY

State: MA

Zip: 02575

Country: USA

which is

☒ its principal office

☐ an office of its transfer agent

☐ an office of its secretary/assistant secretary

☐ its registered office

Signed this 16 Day of August, 2018 at 2:35:22 PM by the incorporator(s). *(If an existing corporation is acting as incorporator, type in the exact name of the business entity, the state or other jurisdiction where it was incorporated, the name of the person signing on behalf of said business entity and the title he/she holds or other authority by which such action is taken.)*

DAIANE CANDIDO

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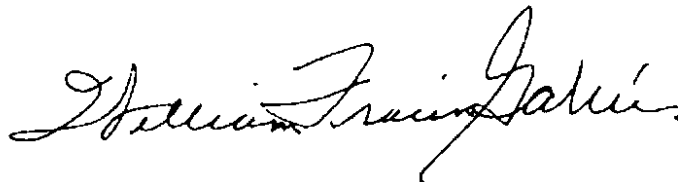
THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears
that the provisions of the General Laws relative to corporations have been complied with.

and I hereby approve said articles; and the filing fee having been paid, said articles are

deemed to have been filed with me on:

August 16, 2018 02:34 PM

A handwritten signature in black ink, reading "William Francis Galvin". The signature is fluid and cursive, with the first name "William" and last name "Galvin" clearly legible.

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

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