

N23000011420

(Requestor's Name)

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☐ PICK-UP

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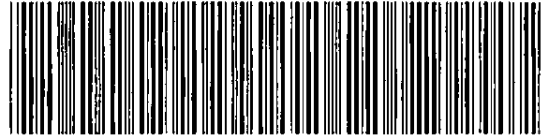
(Business Entity Name)

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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2023

NORA VASQUEZ
3790 161ST TERRACE NORTH
LOXAHATCHEE, FL 33470 US

SUBJECT: THE LOXA HACIENDA NURSERY INC.
Ref. Number: W23000107496

We received your online transmitted document. However, the document has not been filed for the following:

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

If you have any further questions concerning your document, please call (850) 245-6052.

Crystal S Hightower
Regulatory Specialist II
CoT

Letter Number: 223A00017821

To whom it may concern:
ENCLOSED is the paperwork
with the TITLE INCLUDED.

Thank you.

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: THE LOXA HACIENDA NURSERY INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee &
Certificate of
Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: NORA VASQUEZ
Name (Printed or typed)

3790 161st TERRACE North
Address

LOKAHATCHEE FL 33470
City, State & Zip

561-229-5243
Daytime Telephone number

MERCE1829@Live.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLE I NAME

The name of the corporation shall be: THE LOXA HACIENDA NURSERY INC;

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

3790 161ST TERRACE NORTH

LOXAHATCHEE FL. 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE PLANTS, FRUITS & VEGETABLES AT HUGE DISCOUNT TO THE PUBLIC. IN ADDITION USING THE LAND TO DEVELOP NEW GROWTH BY PLANTING & GROWING NEW PLANTS, FRUITS & VEGETABLES SUCH AS TOMATOES, CABBAGE & BANANAS FOR DISTRIBUTION AS A WHOLESALE & RETAIL NURSERY. OUR GOAL IS TO PROVIDE OUR PLANTS AT A LOWER PRICE IN TURN SAVE THE COMMUNITY MONEY AS PRICES CONTINUE TO RISE.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NORA VASQUEZ PRES. Name and Title: _____

Address: 3790 161ST Terr. North Address: _____

LOXAHATCHEE FL. 33470

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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Address

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:

LESLY LHERISSON

Address:

3790 161ST TERR. NORTH
LOXAHATCHEE FL. 33470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

NORA VASQUEZ

Address:

3790 161ST TERR. NORTH
LOXAHATCHEE FL. 33470

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

Lesly Lherisson

Required Signature of Registered Agent

3/8/23
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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

Nora Vasquez

Required Signature of Incorporator

3/8/23
Date

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TALLAHASSEE, FL.

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