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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.**RAMON A. ZUNIGA JARDINERIA EN GENERAL, INC.**

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

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

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TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the corporation shall be:

RAMON A. ZUNIGA JARDINERIA EN GENERAL, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

5800 SW 112 CT.
Miami, FL. 33173

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAMON A. ZUNIGA

5800 SW 112 CT

Miami, FL. 33173

(305) 271-7011 * (786) 251-0855 cell

ARTICLE V - INCORPORATOR

The name and street address of the Incorporator to these Articles of Incorporation is:

RAMON A. ZUNIGA
5800 SW 112 CT.
MIAMI, FL. 33173

The undersigned Incorporator has executed these Articles of Incorporation this _____ day of _____ 20____

Ramon A Zuniga
Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

RAMON A. ZUNIGA, PRESIDENT
5800 SW 112 CT
MIAMI, FL. 33173

ALBY ZUNIGA, SECRETARY & TREASURER
5800 SW 112 CT
MIAMI, FL. 33173

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Ramon A Zuniga
Registered Agent Signature