

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (050)205-0381

Prom:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

: (305)599-0839

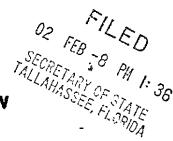
Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

PINAR NURSERY LANDSCAPING, 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.

ARTICLE I NAME

The name of the corporation shall be:

PINAR NURSERY LANDSCAPING , INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business address of this corporation shall be:

21000 SW 198 AVENUE HOMESTEAD , FL 33187

The mailing address of this corporation shall be:

4391 SW 5 TERRACE MIAMI , FL 33134

ARTICLE III SHARES

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

ONE HUNDRED SHARES ONE DOLLAR PAR VALUE

Prepared by: Pedro M. Ramos, CPA 594 East 9 Street #A Hialeah, FL 33010 (305)885-9435

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSE LUIS DIAZ 4391 SW 5 TERRACE MIAMI, FL 33134

ARTICLE V INCORPORATOR(S) See instructions for officers / directors

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

JOSE LUIS DIAZ 4391 SW 5 TERRACE MIAMI, FL 33134

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 7TH day of FEBRUARY 2002.

Signature

Signature

Signature

Notarization is not required NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

PINAR NURSEY LANDSCAPING, INC.

The name and address of the registered agent and office is:

JOSE LUIS DIAZ

4391 SW 5 TERRACE

(P.O. Box or Mail Drop NOT acceptable)

MIAMI, FL 33134

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

FEBRUARY 7, 2002

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314