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**Florida Department of State
Division of Corporations
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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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

MARTIN BORGES SERVICES OF FLORIDA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

of

MARTIN BORGES SERVICES OF FLORIDA, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I- CORPORATE NAME

The name of the corporation is:

MARTIN BORGES SERVICES OF FLORIDA, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida Law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of operating as landscaping and lawn maintenance company.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue five hundred shares (500) of one dollar (\$1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial Registered Agent office and the name of the Initial Registered Agent at that office are:

NAME	<u>MARTIN BORGES</u>
ADDRESS	<u>860 W. 53RD STREET</u>
CITY	<u>HIALEAH, FLORIDA 334014</u>

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TALLAHASSEE, FLORIDA

The principal office, if known or the mailing address of the corporation is:

NAME MARTIN BORGES SERVICES OF FLORIDA, INC.
 ADDRESS P.O. BOX 19102
 CITY WEST PALM BEACH, FLORIDA 33416

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follow:

NAME MARTIN BORGES
 ADDRESS P.O. BOX 19102
 CITY WEST PALM BEACH, FLORIDA 33416

NAME _____
 ADDRESS _____
 CITY FLORIDA ZIP

NAME _____
 ADDRESS _____
 CITY FLORIDA ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporates signing these Articles of Incorporation are as follows:

NAME MARTIN BORGES
 ADDRESS P.O. BOX 19102
 CITY WEST PALM BEACH, FLORIDA 33416

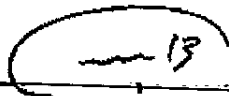
NAME _____
 ADDRESS _____
 CITY FLORIDA ZIP

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NAME _____
ADDRESS _____
CITY _____ FLORIDA ZIP _____

NAME _____
ADDRESS _____
CITY _____ FLORIDA ZIP _____

IN WITNESS WHEREOF, the undersigned and subscriber(s)
have executed these Articles of Incorporation this 8TH
DAY OF APRIL of 2002.

 _____ (Seal)

_____ (Seal)

_____ (Seal)

_____ (Seal)

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CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

MARTIN BORGES SERVICES OF FLORIDA, INC.
(Name Corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

At: MARTIN BORGES SERVICES OF FLORIDA, INC.
860 W. 53RD. TERR.
HIALEAH, FLORIDA 33014

Has named MARTIN BORGES

Located at the aforesaid address, as its Registered Agent to accept service of process within this state

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.


(REGISTERED AGENT)

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