

• (Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



100018959021

05/23/03--01085--005 **87.50

O3 MAY 23 AM 9: 26

961.

TRANSMITTAL LETTER

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

SUBJECT: Bot	anica Iboru' Iboya , エn C・		
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	l a check for:
\$70.00	□ \$78.75	□ \$78.75	☑ \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	& Certificate of
	p is gift ()	ADDITIONAL CO	PY REQUIRED
FROM:	Emma Trapani		
	Name (Printed or typed)		
	6110 W 26 Court		
	A	ddress	
	Hialeah, Fl 33016		
	City, S	State & Zip	
	305-688-6453		
	Davtime Te	lephone number	

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Botanica Iboru' Iboya In C.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

15 E 44 Street Hialeah, FL 33013

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: buy and sell

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Nath Anael Castellanos 6110 W 26 Ct. Hialeah. Fl 33016 President Emma Trapani 6110 W 26 Ct Hialeah, Fl 33016 Vice-President

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Emma Trapani 6110 W 26 Court Hialeah, Fl 33016

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Nath Anael Castellanos 6110 W 26 Court Hialeah, FL 33016

FILEU 03 MAY 23 AM 9: 26 SECRETARY EFFETATE