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SECRETARY OF STATE

ni all.

TRANSMITTAL LETTER

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

SUDJECT: R	reando Guers (Proposed corpo	rero Land sca rate name - must include su	ida) INC
Enclosed is an original ar	nd one(1) copy of the article	es of incorporation and a	check for :
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate
*		ADDITIONAL CO	PY REQUIRED
FROM:	Ricardo G.	riuted or typed)	٠٠
		ackson St.	
	•	Address	
-	Stuart	FL 34997	·
	City,	State & Zip	
		529-5020	

ARTICLES OF INCORPORATION

03 SEP -8 PM 3: 32

SECRETARY OF STATE THE UNDERSIGNED INCORPORATOR, FOR THE PURPOSE OF FORMESCEAFLORIDA CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I NAME
THE NAME OF THE CORPORATION SHALL BE:
RICARDO GUERRERO LANDSCAPING INC

ARTICLES II PRINCIPAL OFFICE
THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS
CORPORATION SHALL BE:
1801 SE JACKSON ST
STUART FL 34997

ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS: FIVE HUNDRED (500) SHARES OF COMMON STOCK WITH A PAR VALUE OF ONE DOLLAR (\$1.00) PER SHARE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:
THE NAME AND FLORIDA STREET ADDRESS OF THE INITIAL REGISTERED AGENT IS:
RICARDO U GUERRERO
1801 SE JACKSON ST
STUART FL 34997

ARTICLE V

NAME OF INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION ARE:

RICARDO U GUERRERO

1801 SE JACKSON ST

STUART FL 34997

SIGNATURE / INCORPORATOR

DATE

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 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.

SIGNATURE / REGISTERED AGENT

DATE

93 SEP -8 PM 3: 32 SECRETARY OF STATE