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(Business Entity Name)

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## TRANSMITTAL LETTER

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

SUBJECT: GEMINI LANDSCAPE MAINTENANCE INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Clemmy A. Villafra  
Name (Printed or typed)

6313 CHASEWOOD DR. APARTMENT H  
Address

JUPITER, FLORIDA 33458  
City, State & Zip

(561) 262-5132  
Daytime Telephone 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: **Gemini Landscape Maintenance Inc.**

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **6313 CHASEWOOD DR. Apt. H  
Jupiter, FLORIDA 33458**

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **LAWN SERVICES AND to  
MAINTAIN LANDSCAPING.**

## ARTICLE IV SHARES

The number of shares of stock is: **20**

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): **Clemmy A. Villafrana  
6313 CHASEWOOD DR. Apt. H  
Jupiter, FL. 33458**

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## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: **Clemmy A. Villafrana  
6313 CHASEWOOD DR. Apt. H  
Jupiter, FL 33458**

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: **Clemmy A. Villafrana  
6313 CHASEWOOD DR. Apt. H  
Jupiter, FL 33458**

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

**Clemmy A. Villafrana**  
\_\_\_\_\_  
Signature/Registered Agent

**4/10/04**  
\_\_\_\_\_  
Date

**Clemmy A. Villafrana**  
\_\_\_\_\_  
Signature/Incorporator

**4/10/04**  
\_\_\_\_\_  
Date