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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 : A 1 A CORPORATE SERVICES, INC
Account Number : 120010000247
Phone : (877) 527-3463
Fax Number : (305) 675-2811

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

04 JUL 23 AM 10:40

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FLORIDA PROFIT CORPORATION OR P.A.

Orchid Pines Nursery, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

07-23-04

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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 :

Orchid Pines Nursery, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is :

20315 S.W.5th St.

Pembroke Pines, Florida 33029

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized:

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

Director, President, Vice President, Secretary & Treasurer

L.B. Sussman

20315 S.W.5th St.

Pembroke Pines, Florida 33029

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ARTICLE VI REGISTERED AGENT

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

L.B. Sussman

20315 SW 5TH ST

PEMBROKE PINES FL 33029

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

L.B. Sussman

20315 SW 5TH ST

PEMBROKE PINES FL 33029

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.

L.B. Sussman

Signature / Registered Agent

7.22.04

Date

L.B. Sussman

Signature/Incorporator

7.22.04

Date

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