## P04000153738

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Cer <u>tificates</u>	s of Status
Special Instructions to	Filing Officer:	
	¥2	
	Office Use On	do



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## TRANSMITTAL LETTER

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

SUBJECT: Nature's Wonders				
(PROPOSED CORPORAT	TE NAME – <u>MUST INCLU</u>	JDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	les of incorporation and	a check for:		
☐ \$70.00 \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: Peter Anuar Name (Printed or typed)				
3801 N.W. 97 Avenue				
(954) 559-	Fl 3300 State & Zip 9388 Jephone number	a <u>4</u>		

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

File A The Control of	
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:	
Naturels Wonders Nursery & Lands	caping , Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
3801 N.W. 97th Avenue Hollywood, F133024	O4 A SECR TALLA
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	NOV -8 PARETARY OF SALINASSEE, F
to make a profit.	GF STA
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):  Principal Owner: Peter Anuer (address;	's same as in Amil on "
Principal Owner: Peter Anuer (address; Secretary: Mos he Anuar (same address	is as in Article It
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the regis	tered agent is:
Peter Aruan Ave. 3801 N.W. 97 Ave.	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:  Peter Anar  Ave.	
3801 N.W. 97 AVE. Hollywood F/ 33024	*********
Having been named as registered agent to accept service of process for the above stated cor,	فيقر ولاحتي والعالب المراجب
certificate, I am familiar with and accept the appointment as registered agent and agree to act	poration at the place designated in this in this capacity 
certificate, I am familiar with and accept the appointment as registered agent and agree to act  Petr Anuar  Signature/Registered Agent	poration at the place designated in this in this capacity  11/2/04  Date
eertificate, I am familiar with and accept the appointment as registered agent and agree to act  Petr Anuar)	11/2/104