

705000022961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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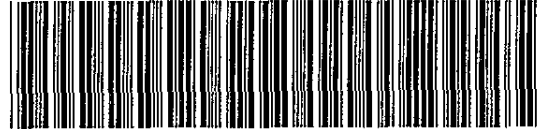
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: _____

GREEN SKY LAWN SERVICE 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: _____

PEDRO and Kathia GONZALEZ
Name (Printed or typed)

3518 SW Rosardo ST
Address

Port. St. Lucie FL 34953
City, State & Zip

561-716-6423
Daytime Telephone number

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DIVISION OF STATE
TALLAHASSEE, FLORIDA

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:

GREEN SKY LAWN SERVICE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3518 SW Rosardo ST Port ST Lucie FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LAWN SERVICE and maintenance.

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PEDRO GONZALEZ CAMPOS — DIRECTOR
3518 SW ROSARDO ST PORT ST LUCIE FL 34953

KATHIA PEREZ GONZALEZ — OFFICER
3518 SW ROSARDO ST PORT ST LUCIE FL 34953

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


KATHIA PEREZ GONZALEZ
3518 SW ROSARDO ST
PORT ST LUCIE FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PEDRO GONZALEZ CAMPOS
3518 SW ROSARDO ST
PORT ST LUCIE FL 34953

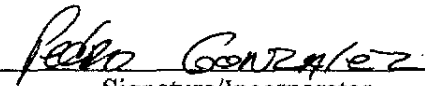
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1-29-05

Date



Signature/Incorporator

1-29-05

Date

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CLERK OF DISTRICT COURT
STATE OF FLORIDA