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SECRETARY OF STATE TALLAHASSEE, FLORID,

2006 JUN -7 PM 2: 55

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## **LAZARUS**

CORPORATE FILING SERVICE 3320 SW 87<sup>TH</sup> AVENUE MIAMI, FL 33165 305-552-5973

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RPORATION NAME(S) & DOCU	JMENT NUMBER(S), (if known):
MARTA'S NURSE	ERY LANDS CAPING, IN
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
	_
(Corporation Name)	(Document #)
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THER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials
E031(7/97)	Examiner 5 initials

#### ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLE 1 - NAME

The name of the corporation shall be:

MARTA'S NURSERY LANDSCAPING, INC.

#### **ARTICLE II - PRINCIPAL OFFICE**

The principal place of business and mailing of this corporation shall be:

4901 SW 122 AU MIBMI - FL - 33175

#### **ARTICLE III - SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

### **ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Roberto Rosell 4901 SW 122 AU Midmi - FL - 33175

#### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Roberto Rosell 4901 SW 122 AU Miami - FL - 3317

The undersigned incorporator has executed these Articles of Incorporation this  $\omega$  day of  $\Im \circ \aleph = 2006$ .

Signature

#### **ARTICLE VI- DIRECTOR (S)**

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Roberto Rosell 4901 Swizz AU President. Mismi-FL-33175

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature