

PD6000105018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

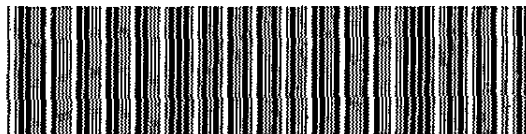
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
8/11

## COVER LETTER

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

SUBJECT: TROPICAL ART LANDSCAPING, 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: JOSE A. PEREZ  
Name (Printed or typed)  
2390 S.W. WYNNEWOOD ST  
Address  
PORT ST. LUCIE, FL 34953  
City, State & Zip  
772 336-3227  
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:

*TROPICAL LANDSCAPE  
TROPICAL ART LANDSCAPING, INC*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*2390 SW WYNNEWOOD STREET  
PORT ST. LUCIE, FL 34953*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*LANDSCAPING BUSINESS*

**ARTICLE IV SHARES**

The number of shares of stock is: *100*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

*JOSE A. PEREZ, PRESIDENT, SECRETARY, TREASURER*

**ARTICLE VI REGISTERED AGENT**

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

*JOSE A PEREZ  
2390 SW WYNNEWOOD ST  
PORT ST. LUCIE, FL 34953*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*JOSE A PEREZ  
2390 SW WYNNEWOOD 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

*Jose A Perez*

Signature/Registered Agent

*Jose A Perez*

Signature/Incorporator

**FILED**

06 AUG 10 PM 3:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*8/06/06*

Date

*8/06/06*

Date