

PO6 000735810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

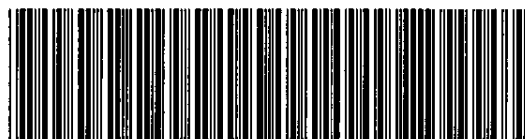
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900080659499

10/25/06--01007--017 \*\*78.75

RECEIVED  
06 OCT 25 AM 10:43  
TALLAHASSEE, FLORIDA

FILED  
06 OCT 25 AM 11:22  
TALLAHASSEE, FLORIDA

J. Shivers OCT 26 2006

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. H & N BEE POLLINATION, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                        |
|--------------------------|----------------------------------------|
| <input type="checkbox"/> | Amendment                              |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/> | Dissolution/Withdrawal                 |
| <input type="checkbox"/> | Merger                                 |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

FILED  
06 OCT 25 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

# 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:

H & N BEE POLLINATION, INC.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2033 NE 24TH TERR - CAPE CORAL FL 33909

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

## **ARTICLE IV SHARES**

The number of shares of stock is:

SHARES: 100

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

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

HERBERTO SANTANA BOULLOSA - PRESIDENT  
2033 NE 24TH TERR  
CAPE CORAL FL 33909

## **ARTICLE VI REGISTERED AGENT**

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

HERBERTO SANTANA BOULLOSA  
2033 NE 24TH TERR  
CAPE CORAL FL 33909

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

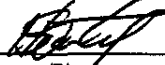
HERBERTO SANTANA BOULLOSA  
2033 NE 24TH TERR  
CAPE CORAL FL 33909

\*\*\*\*\*

*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

10-24-06  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

10-24-06  
\_\_\_\_\_  
Date

FILED  
06 OCT 25 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA