

# Florida Department of State

**Division of Corporations** Public Access System

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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# FLORIDA PROFIT/NON PROFIT CORPORATION

ONA LANDSCAPING INC.

| Certificate of Status |         |
|-----------------------|---------|
| Certified Copy        | 1       |
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FROM : LAZARUS

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Apr. 15 2008 034329M P2 SECRETARY OF STATE DIVISION OF CORPORATIONS

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#### **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.

#### ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

ONA LANDSCAPING INC.

### ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS **CORPORATION SHALL BE:** 

3510 SW 124 COURT MiAMI, 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

<u> ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

PABLO ALEMAY ONA 3510 SW 124 CT MIAMI, FL 33175

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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### **ARTICLE V - INCORPORATOR**

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

PABLO ALEMAY ONA 3510 SW 124 CT MIAMI, FL 33175

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES

OF INCORPORATION THIS
DAY OF ARRIVE

\_, 200 🎖

SIGNATURE

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

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

PABLO ALEMAY ONA (P)

## 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

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