

PD8000039867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

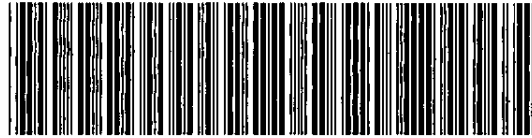
(Business Entity Name)

(Document Number)

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2008 APR 21 AM 8:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CD.4-10

**COVER LETTER**

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

**SUBJECT:** TOP GREEN CORP.  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** LUISA ULLOA  
Name (Printed or typed)

1650 BRICKELL AVE # 109  
Address

MIAMI, FL 33129  
City, State & Zip

305 439 5447  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 10, 2008

LUISA ULLOA  
1650 BRICKELL AVE., #109  
MIAMI, FL 33129

SUBJECT: TOP GREEN CORP.  
Ref. Number: W08000018485

We have received your document for TOP GREEN CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
New Filing Section

Letter Number: 408A00021422

# **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:

**ORISTA CORP.**

## **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailing address is:

1650 BRICKELL AVE # 109

MIAMI, FL. 33129

## **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:

**50 SHARES AT \$1.00 PAR VALUE**

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

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

LUISA ULLOA

1650 BRICKELL AVE # 109

MIAMI, FL. 33129

PRESIDENT

HUGO ULLOA

1650 BRICKELL AVE # 109

MIAMI, FL. 33129

VICEPRESIDENT

**FILED**

**2008 APR 21 AM 8: 27**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

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2008 APR 21 AM 8:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

LUISA ULLOA  
1650 BRICKELL AVE # 109  
MIAMI, FL. 33129

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LUISA ULLOA  
1650 BRICKELL AVE # 109  
MIAMI, FL. 33129

\*\*\*\*\*

*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*

Luisa Ulloa

Signature/Registered Agent

Luisa Ulloa

Signature/Incorporator

4/15/08

Date

4/15/08

Date