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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch NOV 3 2010

COVER LETTER

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

SUBJECT: NATIONAL GREEN SOLUTIONS, 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: ANGELICA JEAN-LOUIS

Name (Printed or typed)

1730 BISCAYNE BLVD., SUITE 201Y

Address

MIAMI, FLORIDA 33132

City, State & Zip

954-663-5203

Daytime Telephone number

NYSERGE@MSN.COM

E-mail address: (to be used for future annual report notification)

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 NATIONAL GREEN SOLUTIONS, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
1730 BISCAYNE BLVD. SUITE 201Y
MIAMI, FL 33132

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
FOR PROFIT

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANGELICA JEAN-LOUIS
Address: 1730 BISCAYNE BLVD. SUITE 201Y
MIAMI, FL 33132

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: ANGELICA JEAN-LOUIS
Address: 1730 BISCAYNE BLVD. SUITE 201Y
MIAMI, FL 33132

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANGELICA JEAN-LOUIS
Address: 1730 BISCAYNE BLVD. SUITE 201Y
MIAMI, FL 33132

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

X Angelica Jean-Louis
Required Signature/Registered Agent

10-25-10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

X Angelica Jean-Louis
Required Signature/Incorporator

10-25-10
Date

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TALLAHASSEE, FLORIDA