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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

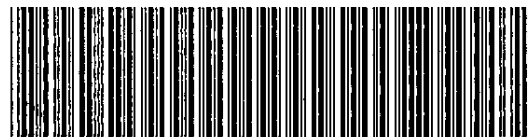
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 FEB 4 2011

## COVER LETTER

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

SUBJECT: AMC Irrigation & 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: Arturo Calderon

Name (Printed or typed)

1700 sw30 Ter.

Address

Cape Coral, FL., 33914

City, State & Zip

239-699-4704

Daytime Telephone number

art.calderonc@gmail.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**

The name of the corporation shall be: **AMC Irrigation & Landscaping, inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**1700 SW30 Ter.**  
**Cape Coral, FL., 33914**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**landscape and Irrigation business**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

Name and Title: <b>Arturo Calderon / President / secretary</b>	Name and Title: _____
Address: <b>1700 SW30 Ter.</b>	Address: _____
<b>Cape Coral, FL., 33914</b>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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


Name: **Arturo Calderon**  
Address: **1700 SW30 Ter.**  
**Cape Coral, FL., 33914**

**ARTICLE VII INCORPORATOR**

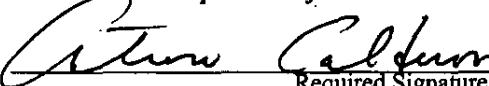
The name and address of the Incorporator is:

Name: **Arturo calderon**  
Address: **1700 SW30 Ter.**  
**Cape Coral, FL., 33914**

*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*

 _____ Required Signature/Registered Agent	<b>1-31-2011</b> _____ Date
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*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.*

 _____ Required Signature/Incorporator	<b>1-31-2011</b> _____ Date
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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA