

P1100002333L

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850) 617-6381

## From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION

Rubico Landscaping Services, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

RECEIVED

11 MAR -9 AM 8:13

DIVISION OF CORPORATIONS

FILED

2011 MAR -9 AM 11:00

TALLAHASSEE, FLORIDA

10 MAR 10 2011

**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: Rubio Landscaping Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
12525 SW 187 Street  
Miami FL 33177

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any Purpose Permitted Under The Laws Of The State Of Florida

**ARTICLE IV SHARES**

The number of shares of stock is: 1000 shares at \$1.00 par value per share

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

Name and Title: Rodolfo Rubio - President

Address: 12525 SW 187 Street  
Miami FL 33177

Name and Title: Cristobal Martinez - Vice President

Address: 12911 SW 52 Street  
Miami FL 33175

Name and Title: Luis Miguel Rubio - Secretary - Treasurer

Address: 5503 SW 127 Way  
Miami FL 33175

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: Rodolfo Rubio

Address: 12525 SW 187 Street  
Miami FL 33177

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Carlos Serrano

Address: 1200 South Pine Island Rd  
Plantation FL 33324

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

By: x Rodolfo Rubio

Required Signature/Registered Agent

3/4/2011

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.817.153, F.S.

[Signature]  
Required Signature/Incorporator

3/4/2011

Date

2011 MAR -9 AM 11:00  
STATE OF FLORIDA  
DEPARTMENT OF STATE

FILED