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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC
4-7-11

COVER LETTER

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

SUBJECT: Forever Green Pest 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: **Ricardo R. Mancias**

Name (Printed or typed)

2090 s.e. 17th st.

Address

homestead, fl. 33035

City, State & Zip

786-379-2067

Daytime Telephone number

richardandmaria@comcast.net /

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: Forever Green Pest Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2090 s.e. 17th st
homestead, fl. 33035

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Pest Control Services

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ricardo R. Mancias (President)
Address: 2090 s.e. 17th st
homestead, fl. 33035

Name and Title: _____
Address: _____

Name and Title: Ricardo R. Mancias (V. President)
Address: 2090 s.e. 17th st
homestead, fl. 33035

Name and Title: _____
Address: _____

Name and Title: Ricardo R. Mancias (Treasurer)
Address: 2090 s.e. 17th st
homestead, fl. 33035

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: Ricardo R. Mancias
Address: 2090 s.e. 17th st
homestead, fl. 33035

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ricardo R. Mancias
Address: 2090 s.e. 17th st
homestead, fl. 33035

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

[Signature]
Required Signature/Registered Agent

4/3/2011
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.817.155, F.S.

[Signature]
Required Signature/Incorporator

4/3/2011
Date

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TALLAHASSEE, FLORIDA