

P12000006821

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN 19 PM 5:00

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

Email Address: _____

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN 19 PM 3:45

FLORIDA PROFIT/NON PROFIT CORPORATION
SERVITA LANDSCAPING, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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i. Bureau JAN 20 2012

H12000016516

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME SERVITA LANDSCAPING, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
661 SW 45TH AVENUE
MIAMI, FL 33134

Mailing address, if different is:
SAME

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
AND AND ALL LAWFUL BUSINESS

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES
The number of shares of stock is: 100 @ 1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT
Address: JOSE DE JESUS GUTIERREZ
661 SW 45TH AVENUE
MIAMI, FL 33134

Name and Title: _____
Address: _____

Name and Title: VP
Address: LAZARO GUTIERREZ
4025 SW 149TH TERRACE
MIRAMAR, FL 33027

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:

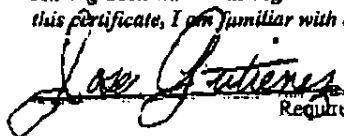
Name: JOSE DE JESUS GUTIERREZ
Address: 661 SW 45TH AVENUE
MIAMI, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: LAZARO GUTIERREZ
Address: 4025 SW 149TH TERRACE
MIRAMAR, FL 33027

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

01/19/2012
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.


Required Signature/Incorporator

01/19/2012
Date

H12000016516