P1200059113

(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
Certified Copies Certificates of Status	(Business Entity Name)
	(Document Number)
Special Instructions to Filing Officer:	Certified Copies Certificates of Status
	Special Instructions to Filing Officer:

Office Use Only



900236913649

07/02/12--01034--003 **70.00

12 JUL -2 PM 3: 07







COVER LETTER

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

SUBJECT: Blue Gardens Inc.	
(PROPOSED CORPORAT	FE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Kristen Woodcock	(Printed or typed)
11624 Monette Rd	
Riverview, FL 33569	State & Zip
813-928-0007 Daytime Te	elephone number
kristenwoodcock@yahoo E-mail address: (to be used	.com 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 II	PRINCIPAL OFFICE		
	Principal street address	Mailing ad	dress, if different is:
	1624 Monette Rd	11624 Monette	Rd
E	Riverview, FL 33569	Riverview, FI 33	3569
			
he purpose for u	PURPOSE hich the corporation is organized is:		
	provide organic produce and fis	h for the local market area	
J	,		
RTICLE IV	CUADEC		
	res of stock is:1000		
RTICLE V	INITIAL OFFICERS AND/OR DIRE	CTORS	
Name and T	tle:Chad Lynch 11624 Monette Rd	Name and Title:	<u> </u>
Address:	11624 Monette Rd	Address:	
	Riverview, FL 33569		
			
Name and Ti	tle: Kristen Woodcock	Name and Title:	
Address:	tle:Kristen Woodcock 11624 Monette Rd	Address:	
	Riverview, FL 33569		
	·		
Name and Ti	tle:	Name and Title	
Address:			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			- الله الله الله الله الله الله الله الل
RTICLE VI	REGISTERED AGENT		N ≤0
	rida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	Kristen Woodcock		ALC: WILLIAM STREET
Address: 11624 Mor	11624 Monette Rd		
	Riverview, FL 33569	<u>.</u>	
RTICLE VII	INCORPORATOR		
	Iress of the Incorporator is:		ب نیاز ا
Name:	Kristen Woodcock		🔾 😅 📆 માં
Address:	11624 Monette Rd		
	Riverview, FL 33569		
avina hoon nam	ed as registered agent to accept service of	process for the above stated corner	ration at the place decimated is
	n familiar with and accept the appointmen		
1/		· ···· · · · · · · · · · · · · · · · ·	
100	MIMDERGLAND		0/27/12
-(-)*	Required Signature/Registered Age	nt	Date
	ment and affirm that the facts stated her		
cument to the D	epartment of State constitutes a third degre	e jeiony as proviaea jor in s.81/.152	D, F.J.
i/	1,07-11/1/03/201		11 -11-
<i>X</i> .	<i>オ オ/\\ X V\\\\</i> <i> \ X X X</i>		14111111