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Florida Department of State  
Division of Corporations  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 JUL -9 PM 2:33

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

From: Account Name : BARINAS & ASSOCIATES INC.  
Account Number : I20000000082  
Phone : (305) 871-0889  
Fax Number : (305) 870-9623

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

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

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TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION  
EXCALIBUR GARDENING & MANAGEMENT, INC

Certificate of Status	1
Certified Copy	0
Page Count:	03
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1/4

**COVER LETTER**

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

**SUBJECT: EXCALIBUR GARDENING & MANAGEMENT, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM: YANELLE M BARINAS**  
Name (Printed or typed)

**5701 NW 36 ST**  
Address

**MIAMI, FL 33166**  
City, State & Zip

**305-871-0889**  
Daytime Telephone number

**BARINASB@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)

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12 JUL -9 AM 9:26

**ARTICLE I NAME** EXCALIBUR GARDENING & MANAGEMENT, INC.  
The name of the corporation shall be:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
641 E. 51ST STREET  
HIALEAH, FL 33013

Mailing address, if different is:  
641 E. 51ST STREET  
HIALEAH, FL 33013

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
ANY AND ALL LAWFUL PURPOSES

**ARTICLE IV SHARES**  
The number of shares of stock is: 1000

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

Name and Title: PRESIDENT  
Address: JUAN ALBERTO ROMERO  
641 E. 51ST STREET  
HIALEAH, FL 33013

Name and Title: VICE PRESIDENT  
Address: MARITZA CABALLERO  
641 E. 51ST STREET  
HIALEAH, FL 33013

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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: JUAN ALBERTO ROMERO  
Address: 641 E. 51ST STREET  
HIALEAH, FL 33013

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JUAN ALBERTO ROMERO  
Address: 641 E. 51ST STREET  
HIALEAH, FL 33013

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

07/09/2012

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

07/09/2012

Date