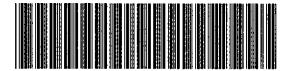
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	"
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COVER LETTER

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

Subject: Sanchez Green Sales & Services ,Inc

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fce & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM	Lourdes L Sanchez
	Name (Printed or typed)
	643 SW 7th Court
	Address
	Miami, Florida 33130
	City, State & Zip
	3059921202
	Daytime Telephone number
	sanchez4lourdes@gmail.com

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 NAM The name of the corpora	Etion shall be: Sanchez Green	Sales & Services, Inc.
	NCIPAL OFFICE	100 30 30
	Principal street address	Mailing address, if different is:
643 SW 7th (Court	Syllin I
Miami, Floric	la 33130	mg 🗷
		100 8: 4
		<u> </u>
The purpose for which t	<u>Pose</u> he corporation is organized is: Sales	& Services of green energy
saving produ	ıcts	
		· · · · · · · · · · · · · · · · · · ·
· ·	<u> </u>	
ARTICLE IV SHA	IRES 1000	
The number of shares of	stock is:	
	<u> FIAL OFFICERS AND/OR DIRECTO</u>	<u>RS</u>
Name and Title	Lourdes L Sanchez	Name and Title:
Name and The		Name and True.
Address	643 SW 7th Court	Address:
	Miami, Florida 33130	
Name and Title:		Name and Title:
Address		Address:
Address	***	Addiess.
		1891
Name and Title:		Name and Title:
Address		Address:
Audress		Address:

Name an	d Title:	Name and Title:	
Address		Address:	
A DOVOL D VII	DEGIGGERED ACTIVE		
ARTICLE VI The name and F	<u>REGISTERED AGENT</u> lorida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Lourdes L Sanchez		THE TOTAL STATE OF THE PARTY OF
Address:	643 SW 7th Court		SS F
	Miami, Florida- 33130		TO A III
ARTICLE VII	INCORPORATOR		8: 4.1 STATE FLORIDA
The name and ac	ddress of the Incorporator is:		
Name:	Lourdes L Sanchez		
Address:	643 SW 7th Court		•
	Miami, Florida 33130		
this certificate, I	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	istered agent and agree to act in this	capacity
	Required Signature/Registered Agent) - 28 - 13 Date
I submit this doc	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false infor	mation submitted in a
La	uds L. Sauches Required Signature/Incorporator		0-28-13