

P13000096137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

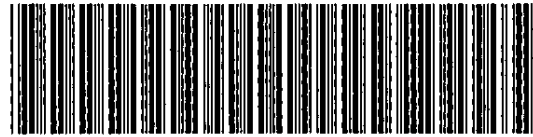
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000253566840

11/12/13--01027--008 **78.75

FILED
13 NOV 27 PM 12:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

W13-62977

K 12/02/13

EFFECTIVE DATE 01/01/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
13 NOV 27 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 14, 2013

ULYSSES A. JOHNSON
2140 NW 89 STREET
MIAMI, FL 33147

SUBJECT: SIR FLOWERS LANDSCAPING, CORP.,
Ref. Number: W13000062977

We have received your document for SIR FLOWERS LANDSCAPING, CORP., and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is P12000013538 (SIR FLOWERS LANDSCAPING, INC).

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II

Letter Number: 513A00026356

COVER LETTER

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

SUBJECT: **SIR FLOWERS LANDSCAPING CORP.,**
(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 ☒ \$78.75
Filing Fee 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
ADDITIONAL COPY REQUIRED	

FROM: **ULYSSES A. JOHNSON**
Name (Printed or typed)

2140 NW 89 STREET
Address

MIAMI, FLORIDA 33147
City, State & Zip

(305) 305 - 8093
Daytime Telephone number

ssakin@bellsouth.net
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) US

ARTICLE I NAME

The name of the corporation shall be: SIR FLOWERS LANDSCAPING ~~CORP.~~ SERVICE, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2140 NW 89 STREET

SAME

MIAMI, FL. 33147

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LANDSCAPING BUSINESS

"EFFECTIVE DATE: - JAN. 1st 2014"

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MR. ULYSSES A. JOHNSON

Name and Title: _____

Address 2140 NW 89 STREET

Address: _____

MIAMI, FL 33147

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
13 NOV 27 PM 12:41
STATE OF FLORIDA
TALLAHASSEE

EFFECTIVE DATE 01/01/14

(conti.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MR. ULYSSES A. JOHNSON
Address: 2140 NW 89 STREET
MIAMI FL. 33147


FILED
13 NOV 27 PM 12:41
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: MR ULYSSES A. JOHNSON
Address: 2140 NW 89 STREET
MIAMI FL. 33147

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

 10-22-2013
Required Signature/Registered Agent 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.

 10-22-2013
Required Signature/Incorporator Date

EFFECTIVE DATE 01/01/14