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∕ (Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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COVER LETTER

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

SUBJECT: MEDINA LAWN MAINTENANCE INC

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

FROM: MEDINA LAWN MAINTENANCE INC
Name (Printed or typed)
8584 93RD AVE N
Address
LARGO, FL 33777
City, State & Zip
Daytime Telephone number
Buytime Perephone number
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)

iicle ii - pr 84 93RD <i>P</i>	INCIPAL OFFICE Principal street address VEN	Ma	iling address, if different is:
NRGO, FL	. 33777		
	RPOSE I the corporation is organized is: I for the purpose of engaging in any activities or busine	ss permitted under the laws	of the United States and the State of Flor
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			\$ 0.5A
		W	>
FICLE IV SH	ARES 100	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	AH D: 40
number of shares o	ITIAL OFFICERS AND/OR DIRECTO		D. 40
number of shares of	of stock is: 100 ITIAL OFFICERS AND/OR DIRECTO le: MANUEL MEDINA PRE		D. 40
number of shares of	of stock is: TOO		, <i>t</i> n
ricle V IN	of stock is: 100 ITIAL OFFICERS AND/OR DIRECTO le: MANUEL MEDINA PRE 8584 93RD AVE N	S Name and Title:	, <i>t</i> n
Name and Tit	of stock is: 100 ITIAL OFFICERS AND/OR DIRECTO le: MANUEL MEDINA PRE 8584 93RD AVE N	S Name and Title: Address:	, t r
Name and Tit	TIAL OFFICERS AND/OR DIRECTOR BENEFICERS AND/OR DIRECTOR BENEFICERS AND/OR DIRECTOR MANUEL MEDINA PRE 8584 93RD AVE N LARGO, FL 33777	S Name and Title: Address: Name and Title:	, t r
Name and Titl	TIAL OFFICERS AND/OR DIRECTO BESSEL MANUEL MEDINA PRE 8584 93RD AVE N LARGO , FL 33777	S Name and Title: Address: Name and Title:	, to
Name and Titl Address Address	TIAL OFFICERS AND/OR DIRECTO BESSEL MANUEL MEDINA PRE 8584 93RD AVE N LARGO , FL 33777	S Name and Title: Address: Name and Title: Address:	, t

Name a	nd Title:	Name and Title:
Addres		Address:
ARTICLE VI	REGISTERED AGENT	
	Florida street address (P.O. Box NOT acceptable) MANUEL MEDINA	of the registered agent is:
Name: Address:	8584 93RD AVE N	-
riddi ess.	LARGO, FL 33777	
ARTICLE VII	INCORPORATOR	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	MANUEL MEDINA	_
Address:	8584 93RD AVE N	
	LARGO, FL 33777	-
Having been na this certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as re	ss for the above stated corporation at the place designated in egistered agent and agree to act in this capacity
X Me	Required Signature/Registered Agent	× 2- 28-14
I submit this do		e true. I am aware that the false information submitted in a
	anuel Malino Required Signature/Incorporator	

COVER LETTER



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

Tallahassee, FL 323	14		
_{SUBJECT:} MEI	DINA LAWN MA	INTENANCE	INC
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM: M	EDINA LAWN M		E INC
		e (Printed or typed)	
85	584 93RD AVE N		
LA	ARGO, FL 337	Address 777 State & Zip	
	Daytime 1	Felephone number	

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

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

<u>ricle II </u>	RINCIPAL OFFICE Principal street address AVE N	Ма	uiling address, if	different is:
RGO , FI	L 33777			
purpose for whic	IRPOSE h the corporation is organized is: ed for the purpose of engaging in any activities or business	permitted under the laws	s of the United State	s and the State of Flor
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		····		E GONP
				\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	of stock is:			TE JOHES
umber of shares	HARES of stock is: 100 IITIAL OFFICERS AND/OR DIRECTOR tle: MANUEL MEDINA PRES			
umber of shares	of stock is:			
TICLE V IN	of stock is: 100 IITIAL OFFICERS AND/OR DIRECTOR tle: MANUEL MEDINA PRES	Name and Title:		
Name and Ti	ITTIAL OFFICERS AND/OR DIRECTOR tle: MANUEL MEDINA PRES 8584 93RD AVE N	Name and Title: Address:		
Name and Ti	ITIAL OFFICERS AND/OR DIRECTOR tle: MANUEL MEDINA PRES 8584 93RD AVE N LARGO, FL 33777	Name and Title: Address: Name and Title:		
Name and Tit	ITIAL OFFICERS AND/OR DIRECTOR tle: MANUEL MEDINA PRES 8584 93RD AVE N LARGO, FL 33777	Name and Title: Address: Name and Title:		
Name and Tit Address Address	ITIAL OFFICERS AND/OR DIRECTOR tle: MANUEL MEDINA PRES 8584 93RD AVE N LARGO, FL 33777	Name and Title: Address: Name and Title: Address:		

Name an	1 Title: Name :	and Title:
Address	Addres	ss:
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the regis	stored agent in
Name:	MANUEL MEDINA	sicieu agent is.
Address:	8584 93RD AVE N	
	LARGO, FL 33777	
ARTICLE VII	INCORPORATOR dress of the Incorporator is:	
rne <u>mame and ad</u>	MANUEL MEDINA	
Name:		
Address:	8584 93RD AVE N	
	LARGO, FL 33777	
	ed as registered agent to accept service of process for the a m familiar with and accept the appointment as registered a	
-	Required Signature/Registered Agent	Date
I submit this docu document to the I	ment and affirm that the facts stated herein are true. I a epartment of State constitutes a third degree felony as prov	m aware that the false information submitted in a ided for in s.817.155, F.S.
	Required Signature/Incorporator	Date