## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, IN

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

Email	Address:			

## FLORIDA PROFIT/NON PROFIT CORPORATION 5 STAR BORDERS AND LANDSCAPE CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION # 15000084	{{L  <del> -</del> {}}
ARTICLE I NAME: The name of the corporation is:	-6 PM 12: 44
5 Star Borders and Landscape Co	5 PONTA
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
1235 SW 78 CT	
Miami FL 33144	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
ARTICLETV INTITAL DIRECTORS AND/OR OFFICERS:	
Nestor Lazaro Puentes Leyva	(P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
NESTOR LAZARO Puentes Leyva	
1235 SW 78 CT	
Miami FL 33144	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
Nestor Lazaro tuentes Leyva	
1235 S.W. 18 C1	
Miami FL 33144	

02/15/2033 05:33

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## Required Signatures:

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

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 of third degree felony as provided for in s.817.155, F.S.

incorporator

Date

ARY OF STATE