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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WALK-GIT ACH 11/10/15

11/09/15 10:09

## COVER LETTER

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

**SUBJECT:** N & W Lawn Services 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  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Wilmor A Arrieta

\_\_\_\_\_  
Name (Printed or typed)

12500 NW 23 Ave

\_\_\_\_\_  
Address

Miami, Fl 33167

\_\_\_\_\_  
City, State & Zip

305-984-1695

\_\_\_\_\_  
Daytime Telephone number

Will102006@hotmail.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)

**ARTICLE I NAME**

The name of the corporation shall be: N & W Lawn Services Corp.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

12500 NW 23 Ave

Miami, Fl 33167

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to provide lawn services

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Wilmor A Arrieta President

Address 12500 NW 23 Ave

Miami, Fl 33167

Name and Title: Orfinda E Arrieta Vice President

Address: 12500 NW 23 Ave

Miami, Fl 33167

Name and Title: Edas N. Quiroz Portillo Director

Address 12500 NW 23 Ave

Miami, Fl 33167

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

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

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

Address \_\_\_\_\_

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

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

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15 NOV - 9 PM 12:09  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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

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

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Wilmor A Arrieta

Address: 12500 NW 23 Ave

Miami, Fl 33167

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Wilmor A Arrieta

Address: 12500 NW 23 Ave

Miami, Fl 33167

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TALLAHASSEE, FLORIDA

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 11/01/2015. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

11/01/2015

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

11/01/2015

Date