

P16000091330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

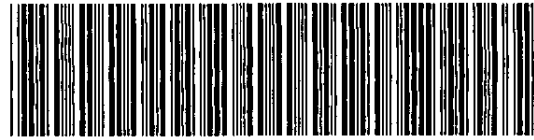
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/20/16--01006--012 **78.75

FILED
2016 NOV 14 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

V HERRING
NOV 16 2016

COVER LETTER

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

SUBJECT: MIM Landscaping Services Inc.
(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: Mayra Saladriga
Name (Printed or typed)

3172 SW 135 AVE
Address

Miami, FL 33175
City, State & Zip

786.295.3208
Daytime Telephone number

mayresantiago@aol.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 24, 2016

MAYRA SALADRIGA
3172 SW 135 AVE
MIAMI, FL 33175

SUBJECT: MIM LANDSCAPING SERVICES INC.
Ref. Number: W16000072294

We have received your document for MIM LANDSCAPING SERVICES INC. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 616A00022795

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

FILED

2016 NOV 14 AM 9:52

ARTICLE I NAME
The name of the corporation shall be: MIM Landscaping Services Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address
3172 SW 135 AVE
Miami, FL 33175

Mailing address, if different is: _____
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Landscaping services

ARTICLE IV SHARES
The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Mayra Saladriga, President</u>	Name and Title:	_____
Address	<u>3172 SW 135 AVE</u>	Address:	_____
	<u>Miami, FL 33175</u>		_____

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

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

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SE.
TALLAHASSEE, FLORIDA
DEPT. OF STATE

ARTICLE VI REGISTERED AGENT

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

Name: Mayra Saladriga

Address: 3172 SW 135 AVE

Miami, FL 33175

ARTICLE VII INCORPORATOR

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

Name: Mayra Saladriga

Address: 3172 SW 135 AVE

Miami, FL 33175

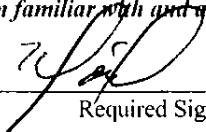
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

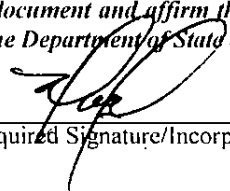


Required Signature/Registered Agent

10/13/16

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

10/13/16

Date