## P17000068290

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
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| Codifical Coalina                       |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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TAUGIL AH 8: 42
SECACIARY OF STATE
ALLAHASSEE FLORIE.

## **COVER LETTER**

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

| REINIE SUBJECT:         | R ALONSO LANDSCAPING CO                      | <b>RP</b>                          |   |  |  |
|-------------------------|--|------------------------------------|---|--|--|
| зоваест                 | (PROPOSED CORPOR.                            | ATE NAME - <u>MUST INCL</u>        | UDE SUFFIX)   |  |  |
| Enclosed are an orig    | ginal and one (1) copy of the ar             | ticles of incorporation and        | d a check for:  |  |  |
| ■ \$70.00<br>Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy | S87.50 Filing Fee. Certified Copy & Certificate of Status |  |  |
|                         | ADDITIONAL COPY RE                           |                                    |   |  |  |
| FROM:                   | Name (Printed or typed)  12721 SW 30th St    |                                    |   |  |  |
|                         |  | Address                            |   |  |  |
| Mia                     | mi.FL.33175                                  |                                    |   |  |  |
| City, State & Zip       |  |                                    |   |  |  |
| 786                     | -317-3942                                    |                                    |   |  |  |
|                         | Daytime 1                                    | elephone number                    | <del></del>   |  |  |
| rein                    | ier71281@gmail.com                           |                                    |   |  |  |
| <del></del>             | E-mail address: (to be use                   | d for future annual report r       | 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 II PRINCIPAL OFFICE Principal street  | address                                     | Mailing a  | Mailing address, if different is: |  |
|---|---|--|-----------------------------------|--|
| 12721 SW 30th St  |   |  |                                   |  |
| Miami,Fl.33175  |   |  |                                   |  |
| ARTICLE III PURPOSE The purpose for which the corporation is                                  | TRIM . R                                    | EPAIR, IMPROVE IN THE I                              | FIELD OF LANDSCAPING              |  |
|   |   |  |                                   |  |
|   |   |  | 17 A                              |  |
| ARTICLE IV SHARES The number of shares of stock is:   |   |  | AUG I                             |  |
| <u> ARTICLE V - INITIAL OFFICERS A</u>  | Which bingstone                             |  |                                   |  |
| MITCEL 7 I. TITLE OF TELLOT   | <i>                                    </i> |  | '몫 <b>≥ 1</b> F                   |  |
| REINIER J AL  | ONSO,PRESIDENT                              | Name and Title:                                      |                                   |  |
| Name and Title: REINIER J AL Address 12721 SW 30T   | ONSO,PRESIDENT                              | Name and Title:  Address:                            |                                   |  |
| Name and Title:   | ONSO, PRESIDENT                             |  |                                   |  |
| Address 12721 SW 30T  | ONSO, PRESIDENT                             |  | E S E C                           |  |
| Address 12721 SW 30T  | ONSO,PRESIDENT<br>H ST<br>175               | Address:   | TOAIE                             |  |
| Address  Address  MIAMLFL.33  Name and Title:   | ONSO,PRESIDENT<br>H ST<br>175               | Address:  Name and Title:                            | F COMIDA                          |  |
| Address  Address  I2721 SW 30T  MIAMLEL.33  Name and Title:  Address                          | ONSO,PRESIDENT<br>H ST<br>175               | Address:  Name and Title:  Address:                  | FCOAID                            |  |
| Address  Address  MIAMLEL.33  Name and Title:  Address  | H ST  | Address:  Name and Title:  Address:                  | T 8: 41                           |  |
| Name and Title:  Address  I2721 SW 30T  MIAMLEL.33  Name and Title:  Address  Name and Title: | H ST  | Address:  Name and Title:  Address:  Name and Title: | T S TATE                          |  |

| Name a  | and Title:   | Name and Title:   | <del></del>   |  |
|---|--|---|---|--|
| Address   |  | Address:  |   |  |
|   |  |   |   |  |
|   |  | <del></del>   |   |  |
|   |  |   |   |  |
|   | <u>REGISTERED AGENT</u><br>Florida street address (P.O. Box NOT ac | ceptable) of the registered agent is:   |   |  |
| Name:   | REINIER J ALONSO   |   |   |  |
| Address:  | 12721 SW 30TH ST   |   |   |  |
|   | MIAMLFL,33175  |   |   |  |
|   |  | <del></del>   | 7.55 ±  |  |
| ARTICLE VII   | INCORPORATOR   |   | AU  |  |
| The <u>name and a</u>   | address of the Incorporator is:                                    |   | T C E   |  |
| Name:   | REINIER J ALONSO   |   |   |  |
| Address:  | 12721 SW 30TH ST   |   | 7. ST. 68   |  |
|   | MIAMI.FL.33175   |   | FILED 7AUG 14 AM 8: 41 CAETARY OF STATE CAHASSE EFFLORIOA |  |
| Effective date, i<br>(If an effective<br>days after the f<br>Note: If the dat | filing.)   | and cannot be more than five business d applicable statutory filing requirements, th        |   |  |
|   |  | of process for the above stated corporation<br>ment as registered agent and agree to act in | this capacity   |  |
|   |  |   | 08/15/2017  |  |
| C   | Required Signature/Registered                                      | Agent   | Date  |  |
|   |  | herein are true. I am aware that the false<br>egree felony as provided for in x817.155, I   |   |  |
| R   |  |   | 08/15/2017  |  |
| Requ  | uired Signature/Incorporator                                       | ·   | Date  |  |

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