Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		18 MAY -3
	Division of Corporations Fax Number : (850)617-6381	ယ
	PAX Ruinber . (650)017 0501	3
From:	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	~
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I28800000019	<i>7</i> : 60
	Phone : (30S)552-5973	Ğ
	Fax Number : (305)675-5944	
**Ent	ter the email address for this business entity to be used fo annual report mailings. Enter only one email address please Email Address:	r future
**Ent	annual report mailings. Enter only one email address please Email Address:	
RCIAL VICES	annual report mailings. Enter only one email address please	N
SERVICES	Email Address: FLORIDA PROFIT/NON PROFIT CORPORATIO	N C RI
CONTRACIAL ION SERVICES	Email Address: FLORIDA PROFIT/NON PROFIT CORPORATIO GARCIA BARCELO LANDSCAPING CORP.	N
CE DORMEROIAL AMTION SERVICES	Email Address: FLORIDA PROFIT/NON PROFIT CORPORATIO GARCIA BARCELO LANDSCAPING CORP. Certificate of Status	N C RI

Corporate Filing Menu

Electronic Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

GARCIA BARCELO LANDSCAPING CORP.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
7175 SW 8TH #210
MIAMI PL. 33144
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
OMAR GARCIA (P)
TO COUNTRY AND THE COUNTRY AND
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
OMAR GARCIA
7175 SW 8TH ST
MIAMI FL. 33144
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
OMAR GARCIA
7175 SW 8th #210
MIAMI FL 33144

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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

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.

Date