

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, INC.  
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DIVISION OF CORPORATIONS  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
JASCAPES LANDSCAPING CORP.

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

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:Jascapes Landscaping Corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10836 NW 30th Pl  
Sunrise FL 33322**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Carlos H. Sagastume "P"Carla Aoosta "VP"**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Carla Aoosta10836 NW 30th Pl  
Sunrise FL 33322**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Carla Aoosta10836 NW 30th Pl.  
Sunrise FL 33322

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

  
\_\_\_\_\_  
Incorporator

\_\_\_\_\_  
Date