

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6381

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Account Name : FASTKIT CORP
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FLORIDA PROFIT/NON PROFIT CORPORATION
ULLOA LANDSCAPING SERVICES, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

2019 SEP 11 PM 12:24

2019 SEP 11 AM 11:12
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SEP 12 2019



September 11, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FAST KIT

SUBJECT: ULLOA LANDSCAPING SERVICES, INC.
REF: W19000082362

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H19000271151
Letter Number: 919A00018724

RECEIVED
DIVISION OF CORPORATIONS
19 SEP 11 AM 11:12
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME ULLOA LANDSCAPING SERVICES, INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2114 SW 98 TH ST

MIAMI, FL, 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LANDSCAPING SERVICES

ARTICLE IV SHARES

100 PER VALUB \$ 1.00

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSE MEDINA ULLOA

Name and Title: _____

Address: 2114 SW 98 TH ST

Address: _____

MIAMI, FL, 33165

President

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 01-11-2011 BY 60322 UCBAW/STP

19 SEP 11 AM 11:12

SECTION OF INCORPORATION

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

ARTICLE VI REGISTERED AGENT

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

Name: JOSE MEDINA ULLOA
Address: 2114 SW 98 TH STREET
MIAMI, FL, 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSE MEDINA ULLOA
Address: 2114 SW 98 TH STREET
MIAMI, FL, 33165

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 days prior or 90 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

9-6-19
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

9-6-19
Date

STATE OF FLORIDA
DIVISION OF CORPORATION
19 SEP 11 AM 11:12
TALLAHASSEE, FLORIDA