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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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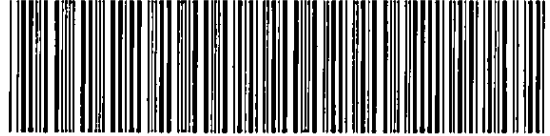
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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19 NOV 12 PM 2:15

SECRETARY OF STATE  
OF MASSACHUSETTS

D O'KEEFE  
NOV 12 2019

## COVER LETTER

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

SUBJECT: ANGEL & ASSOCIATES LANDSCAPING CORP

(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: ANGEL & ASSOCIATES LANDSCAPING CORP

Name (Printed or typed)

14609 NW 185TH STREET FLOIDA

Address

HEATH FL 32018

City, State & Zip

786-536-8234

Daytime Telephone number

PROFESSIONAL S CONTACT @ GMAIL .COM

E-mail address: (to be used for future annual report 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 I NAME**

The name of the corporation shall be: ANGEL & ASSOCIATE LANDSCAPING CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

14601 NW 185TH STREET LOT 34

MIAMI LAKE 33018

Mailing address, if different is:

SAME

**ARTICLE III PURPOSE**

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

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CLERK OF DISTRICT COURT  
MIAMI, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ANGELINO MUNOZ (P)

Address: 14601 NW 185TH STREET LOT 34

MIAMI LAKE 33018

Name and Title: JOSE MIGUEL MUNOZ (V.P)

Address: 14601 NW 185TH STREET LOT 34

MIAMI LAKE 33018

Name and Title: ARMANDO MARTINEZ ANGELLES (D)

Address: 14601 NW 185TH STREET LOT 34

MIAMI LAKE 33018

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: ANGELINO MUNOZ

Address: 14601 SW 185TH ST LOT 34

HALEAH FL 33018

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: ANGELINO MUNOZ

Address: 14601 SW 185TH ST LOT 34

HALEAH FL 33018

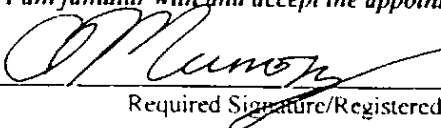
**ARTICLE VIII EFFECTIVE DATE:**

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*

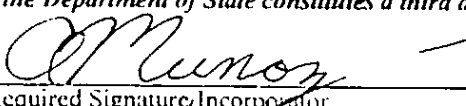


Required Signature/Registered Agent

11/09/2019

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

11/09/2019

Date