

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P21000048249

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H210002015363ABCU

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To:

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

From:

Account Name : TAXPEOPLE LLC
Account Number : 120200000160
Phone : (772)460-1000
Fax Number : (772)777-3071

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
DINO'S LANDSCAPING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2021 MAY 19 PM 9:30

2021 MAY 20 AM 9:43

(((H21000201536 3)))

COVER LETTER

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

SUBJECT: DINO'S LANDSCAPING, INC.(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:** TAXPEOPLE LLC

Name (Printed or typed)

2855 SW BRIGHTON ST

Address

PORT ST LUCIE, FL 34953

City, State & Zip

772.460.1000

Daytime Telephone number

info@taxpeoplefl.com

E-mail address: (to be used for future annual report notification)

2021 MAY 20 AM 9:43

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: DINO'S LANDSCAPING, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

214 NE BRUNSON CTPort St Lucie, FL 34983**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: SANTOS WILFREDO TIU GARCIA / PName and Title: DIONICIO FELIPE HERNANDEZ VASQUEZ/VP

Address

214 NE Brunson Ct

Address:

918 SW Dalton AvePort St Lucie, FL 34983Port St Lucie, FL 34953

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: TAXPEOPLE LLC
Address: 2855 SW BRIGHTON ST
Port St Lucie, FL 34953

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: CLAUDIO TOLEDO RIBEIRO
Address: 2855 SW BRIGHTON ST
Port St Lucie, FL 34953

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

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

Date