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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:	Division of Commentions	•	}=
	Division of Corporations	12.	$\frac{1}{\infty}$
	Fax Number : (850)617-6381		
From:		***	PH 12: 4:
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	: ~'*	~
	Account Number : I20000000019		٠.٠
	Phone : (305)552-5973		£
	Fax Number : (305)675-5944	>~	w

FLORIDA PROFIT/NON PROFIT CORPORATION LOPEZ NURSERY CORP.

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
Estimated Charge	\$78.75		

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I	NAME:	The name of	the cor	poration	is
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Lopez Wursery Corp.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is: 17820 SU 2001 37
17820 SW 20014 ST Mani FC 33187
ARTICLE III SHARES: The number of shares of stock is: /CIO
Baturnino Andres Lopez Horales (P)
2
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
Saturnino Andres Lopez Morales
17820 Sw 200th St
miami F1 33187
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Saturnino Andres Lopez Morgles
17820 SW 200+h St
miami F1 33187

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

21 JUL -8 PM 12: 43