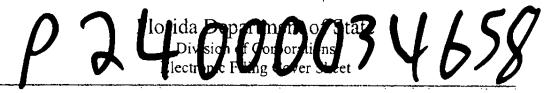
5/21/24, 1:02 PM

Division of Corporations



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.

(((H240001818913)))



H240001818913ABC1

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

\*\*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 ENVIRO SERVICING CORP

 Certificate of Status
 0

 Certified Copy
 1

 Page Count
 03

 Estimated Charge
 \$78.75

CENED

20241

Electronic Filing Menu Corporate Filing Menu

Help

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

TCLE I NAME name of the corporal	ion shart oc.		
TICLEIL PRINC 7110 SW MIAMI FR	TPAL OFFICE Principal street address	- 713 - M.	Mailing address, if different is: 36 SW 42 tex  MM1, FL 33155
TCLE III PURPO purpose for which t	DSE the corporation is organized is: _ANY	ANZ	All lawful busines
tere in entr	rc		
number of shares of	stock is: 1000,000  AL OFFICERS AND/OR DIRECTORS  E: Baul Socia Jr. (Presi 2136 SW 42 ter	Address:	le:
Name and Title Address	stock is: 1000,000 AL OFFICERS AND/OR DIRECTORS C: Baul Socia Jr. (Presi	Address:  Name and Tite  Address:	úc:

ARTICLE VI. REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Address:  7136  SW 42+5  Minm, FC 33155  ARTICLE VII. INCORPORATOR The name and address of the Inconporator is:  Name:  Address:  7136  SW 42+5  Minm, FC 33155  ARTICLE VII. EFFECTIVE DATE:  Effective date, it other than the date of filing:  (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.)  Nuts: If the date inserted in this black 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 heen named as registered agent to accept service of process for the above stated corporation at the place designated in this energitate, and familiar with and accept the appointment as registered agent and agree to act in this capacity  Required SignatureRegistered Agent  I submit this document and affirm that the faces saided herein are true. Than aware that the fabre information submitted-in and acceptation of the Department of State constitutes a third degree felony as provided for in x.817.155, F.S.  Pate	Name and Title:	Name and Title:
The name and Plorida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Address:  7136 SW 424V  Minnip FC 33185  ARTICLE VII INCORPORATOR  The name and address of the laconyonator is:  Name:  Address:  7136 SW 424V  Minnip FC 33155  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of tiling:  (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days utter the filing.)  Note: If the date inserted in this block does not meet the applicable stanutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  Having heen 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 capation.  Required Signalure/Registered Agent  I submit this document and offirm that the faces stated hereon are true. I am aware that the false information submitted in addressing the degree fellows as provided for in s. \$17.153, F.S.  Recapited Signalure/Incorporator  Date  Reparted Signalure/Incorporator	Address	Address:
The name and Plorida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Address:  7136 SW 42+V  Minni FV 33185  ARTICLEVII INCORPORATOR  The name and address of the laconyonator is:  Name:  Address:  7136 SW 42+V  Minni FC 33185  ARTICLEVII EFFECTIVE DATE:  Effective date, if other than the date of filling:  (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 filling:  Note: If the date inserted in this block does not meet the applicable stantory filling requirements, this date will not be listed as the document's effective date on the Department of State's records.  Having heen named as registered agent to accept service of process for the above stated corporation at the place designated in this conficient.  I submit this document and offirm that the faces stated therein are true. I am aware that the false information vubmitted in addressing in the Department of State constitutes a third degree felony as provided for in s. \$17.155, F.S.  Recapited Signalune/Incorporator  Date  Recapited Signalune/Incorporator		
The name and Plorida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Address:  7136 SW 424V  Minni FV 3318S  ARTICLE VII INCORPORATOR  The name and address of the laconyorator is:  Name:  Address:  7136 SW 424V  Minni FC 3315S  ARTICLE VIII INFECTIVE 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 one familiar with and accept the appointment as registered agent and agree to act in this capacity.  Required Signature/Registered Agent  I submit this document and affirm that the facts stated herein are true. I am aware that the false information unbanified in addressing the Department of State constitutes a third degree felony as provided for in s. \$17.155, P.S.  Recarded Signature/Incorporator	4144-444-444-444-44-44-44-44-44-44-44-44	
The name and Plorida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Address:  7136 SW 424V  Minnip FC 33185  ARTICLE VII INCORPORATOR  The name and address of the laconyonator is:  Name:  Address:  7136 SW 424V  Minnip FC 33155  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of tiling:  (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days utter the filing.)  Note: If the date inserted in this block does not meet the applicable stanutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  Having heen 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 capation.  Required Signalure/Registered Agent  I submit this document and offirm that the faces stated hereon are true. I am aware that the false information submitted in addressing the degree fellows as provided for in s. \$17.153, F.S.  Recapited Signalure/Incorporator  Date  Reparted Signalure/Incorporator		
The name and Plorida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Address:  7136 SW 424V  Minni, FC 33185  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  Address:  7136 SW 424v  Minni, FC 33185  ARTICLE VIII EFFECTIVE DATE.  Effective date, if other than the date of filling:  (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 filling.)  Note: If the date inserted in this block does not meet the applicable stantory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  Having heen 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 capation.  Required Signalure/Registered Agent  I submit this document and offirm that the faces sinted herein are true. I am aware that the false information submitted in an adocuprate to the Department of State constitutes a third degree felony as provided for in s. \$17.155, F.S.  Recarded Signalure/Incorporator		
Name: Ray Sova JC.  Minni FL 33155  ARTICLE VIII INCORPORATOR  The name and address of the incorporator is:  Nome: Ray Sovie JC.  Address: At 136 Sw 42 ter  Minni FC 33155  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filling.  (OPTIONAL)  (If an effective date in this black 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 heen named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. Jone familiar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature/Registered Agent  I submit this document and offirm that the face stated therein are true. I take aware that the false information submitted in authory of the Department of State constitutes a third degree felony as provided for in \$317.155, F.S.  Recarded Signature/Incorporator  Date  Required Signature/Incorporator	ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Bot	x NOT acceptable) of the registered agent is:
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  Address:  Article VII EFFECTIVE DATE:  Effective date, if other than the date of filing:  (If an effective date, if other than the date of filing:  (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 black 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 heen named as registered agent to accept service of process for the above stated corporation at the place designated in this certificing. Implication with and accept the uppaintment as registered agent and agree to act in this capacity.  Required Signature/Registered Agent  I submit this document and offirm that the facts stated herein are true. Than aware that the false information-vubmitted-in and decupering to the Department of State constitutes a third degree felony as provided for in v. 817.155, F.S.  Required Signature/Incorporator  Date  The name and address of the incorporator.  Date  On the state of the incorporator and office in the false information-vubmitted-in and decupering to the Department of State constitutes a third degree felony as provided for in v. 817.155, F.S.  Date  The name and address of the incorporator and adverse felony as provided for in v. 817.155, F.S.		
MIAM. FL 33155  The name and address of the incorporator is:  Name:  Real SQL PL  Address:  Address:  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:  (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 black does not meet the applicable statustory 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 man familiar with and accept the appointment as registered agent and agree to uct in this capacity.  Required Signature/Registered Agent  I submit this forement and affirm that the faces stated herein are trial. I am aware that the false information-vubmitted-in-adocuption to the Department of State constitutes a third degree felony as provided for in v. 817.155, F.S.  Required Signature/Incorporator  Date  Page 1.	· · · · · · · · · · · · · · · · · · ·	·
The name and address of the Incorporator is:  Name:    Record   SQL   R   T		
The name and address of the Incorporator is:  Name: Real Sovier T.  Address: A 136 Sov 42 ter  Minmi, FC 33155  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:  (OPTIONAL)  (If an effective date, if other than the date of filing:  (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 are familiar with and accept the appointment as registered agent and agree to act in this capacity.  Required Signature/Registered Agent  I submit this document and affirm that the facts stated herein are true. I am aware that the false information rubmitted in adocument to the Department of State constitutes a third degree felony as provided for in v. 817, 155, F.S.  Required Signature/Incorporator  Date  Page 1.	1011th, 10	03.00
The name and address of the Incorporator is:  Name: Real Sovier T.  Address: A 136 Sov 42 ter  Minmi, FC 33155  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:  (If an effective date, if other than the date of filing:  (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 are familiar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature/Registered Agent  I submit this document and offirm that the facts stated herein are true. I am aware that the false information submitted in adocument to the Department of State constitutes a third degree felony as provided for in v. 817, 155, F.S.  Required Signature/Incorporator  Date  The process of the appointment of State constitutes a third degree felony as provided for in v. 817, 155, F.S.  Page 15 12 0 7 2 4  Required Signature/Incorporator	ARTICLE VII INCORPORATOR	
Name: Address: 7136 SW 42 fer  Minmi, FC 33155  ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:		
ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:  (OPTIONAL)  (If an effective date, if other than the date of filing:  (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 heen 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  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted in adocuprent to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.  Required Signature/Incorporator  Date  The date of the properties of the applicable statutory filing requirements, this date will not be listed as the december of the applicable statutory filing requirements, this date will not be listed as the december of the applicable statutory filing requirements, this date will not be listed as the document is at the place designated in this capacity.  Required Signature/Registered Agent  Date  Date  The date inserted in this date will not be listed as the date of the applicable statutory filing requirements, this days prior or 90 days after the filing.  The date inserted in this date will not be listed as the date of the applicable statutory filing requirements, this days prior or 90 days after the filing.  The date inserted in this date will not be listed as the days prior or 90 days after the filing.	12 \ 500	A IT.
MIRMY FC 33155  Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 tlays after the filing.)  Note: If the date inserted in this black 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 heen named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I my familiar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature/Registered Agent  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocupation of the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  The date inserted in this black does not meet the applicable statutory filing requirements, this date will not be listed as the decision of the place designated in this certificate and accept the applicable statutory filing requirements, this date will not be listed as the designated in this certificate and accept the place designated in this certificate and accept the application of the place designated in this certificate and accept the application of the place designated in this certificate. The acceptance is a submit this document and affirm that the facts stated therein are true. The acceptance is a fact that the facts are true. The acceptance is a fact that the facts acceptance is a fact that the facts are true. The acceptance is a fact that the facts are true. The acceptance is a fact that the facts are true. The acceptance is a fact that the fact	0.01 51	•
Effective date, if other than the date of filing:  (If an effective date, if other than the date of filing:  (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  I submit this document and offirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocument to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  The date inserted in this document and offirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocument to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.	• • • • • • • • • • • • • • • • • • • •	
Effective date, if other than the date of filing:  (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  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocument to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  The date inserted in this date will not be listed as the degree felony as provided for in v.817.155, F.S.  Date		
Effective date, if other than the date of filing:  (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  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocument to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  The date inserted in this date will not be listed as the false information and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocument to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator	ARTICLE VIII FEFECTIVE DATE:	
Note: If the date inserted in this black 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  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-vubmitted-in-adocument to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  The date inserted in this date will not be histed as a provided for in v.817.155, F.S.  Date  The date inserted in this date will not be histed as a provided for in v.817.155, F.S.	mar Le if where they they does of filing:	. (OPTIONAL)
Having heen 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  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocuprent to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  1. The degree of the degree felony as provided for in v.817.155, F.S.  Date  1. The degree of the degree felony as provided for in v.817.155, F.S.	(If an effective date is listed, the date must o filing.)	e specific and cannot be more tout the bays pelos of a bays
Required Signature/Registered Agen:  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocuprent to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.  Required Signature/Incorporator  Date  Date	Note: If the date inserted in this block does no the document's effective date on the Departme	it meet the applicable statutory filing requirements, this date will not be listed as nt of State's records.
Required Signature/Registered Agent  I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocuprent to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  Date	Having been named as registered agent to accept certificate. I am familiar with and accept the ap	ot service of process for the above stated corporation at the place designated in this oppointment as registered agent and agree to act in this capacity
I submit this document and affirm that the facts stated herein are true. I am aware that the false information-submitted-in-adocuprent to the Department of State constitutes a third degree felony as provided for in v.817.155, F.S.  Required Signature/Incorporator  Date  Date	$V_{-}$	
Required Signature/Incorporator  Date  Date	· · · · · · · · · · · · · · · · · · ·	negistered rigetti
Required Signature/Incorporator  Date  5/20/24  La  La  La  La  La  La  La  La  La  L	I submit this document and affirm that the fa	icts stated herein are true. I am aware that the false information-submitted-in a es a third degree felony as provided for in v.817.155, F.S.
2624 4		
2624 4	Required SignAme/Incorporator	. Date
		'
; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		2624
· · · · · · · · · · · · · · · · · · ·		
		fs.
:		5°- 