# P 99000032408 Florida Department of State

Division of Corporations

Public Access System Katherine Harris, Secretary of State

### Electronic Filing Cover Sheet

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.

(((H99000008267 9)))

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) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346 APR -8 AM 7: 14
CRETARY OF STATE
AMASSEE FLORIDA

### FLORIDA PROFIT CORPORATION OR P.A.

ARTIGA, INC.

Sanager (1996) and an experience of the contract of the contra	\$\$\$\$0000000000000000000000000000000000
Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

F. CHESSER APR

a 1999

## CERTIFICATE OF INCORPORATION OF ARTIGA, INC.

- I, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida.
- 1. The name of the corporation shall be: ARTIGA, INC., and its existence shall be perpetual.
- 2. The general nature of the business to be transacted shall be landscaping, gardening and have all other powers provided by the laws of the State of Florida.
- 3. The dapital stock of the corporation shall consist of fifty (50) shares, without nominal par value.
- 4. The amount of capital with which this corporation shall begin business in not less than PIVE HUNDRED DOLLARS.  $\equiv$
- 5. The principal office of this corporation shall be at 1561 N.E. 10th Street, Homestead, Florida 33033.
- 6. The number of directors shall be at least one (1), and the names and post office addresses of the first Board of Directors and Officers are:

NAME

OFFICE

POST OFFICE ADDRESS

1. CARLOS ARTIGA

President

1561 N.E. 10th Street Homestead, Florida 33033

7. The names and post office addresses of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefore, the proceeds of which will amount to not less than FIVE HUNDRED DOLLARS (\$500.00), are as follows:

This Document prepared by: Daniel M. Keil, P.A. 3165 West 4th Avenue Hialeah, Florida 33012 Telephone No. (305) 883-6600 Florida Bar No. 181663 NAME AND ADDRESS

NO. OF SHARES

CONSIDERATION

1. CARLOS ARTIGA

50

\$500.00

8. DANIEL M. KEIL, Esq., is hereby designated as the Registered Agent for the corporation and 3165 West 4th Avenue, Hialeah, Florida.

IN WITNES; WHEREOF, the undersigned hereby subscribe to this Certificate of Incorporation at Hialeah, Florida this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 1993, for the uses and purposes aforesaid.

CARLOS ARTICA

STATE OF FLORIDA

SS .

COUNTY OF DADE

BEFORE ME, the undersigned authority, personally appeared

#### 1. CARLOS ARTIGA

Subscriber(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they did subscribe thereto, and did so for the uses and purposes therein contained.

SWORN TO and SUBSCRIBED before me at Hialeah, Dade County, Florida this the Oliver day of April 1999.

Notary Public. State of FL

My Commission Expires:

This Document prepared by: Daniel M. Keil, P.A. 3165 West 4th Avenue Hialeah, Flor: da 33012 Telephone No. (305) 883-6600 Florida Bar No. 181663 OFFICIAL NOTARY STAL
RMILIA T MURGADO
NOTARY PUBLIC STATE OF FLOREDA
COMMESION NO. CC776506
MY COMMISSION EXP. SEPT 17 2002

CERT::FICATE OF DESIGNATING PLACE OF BUSINESS OR DCMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM PROCESS MY BE SERVED.

In compliance with Section 28.091, Florida Statutes, the following is submitted:

### ARTIGA, INC.

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Miami, State of Florida, has named DANIEL M. KEIL, Esquire located at 3165 West 4th Avenus, Hialeah, Florida, 33012 as its Agent to accept service of process within Florida.

CORPORATE OFFICER

TITLE Made I

DATE 4-6-79

APR -8 AM CORETARY OF S LLAHASSEE, FI

I HAVING REEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE.
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND
COMPLETE PERFORMANCE OF MY DUTIES.

RESTDENT AGENT

DATE 4-6-99

This Document prepared by: Daniel M. Keil, P.A. 3165 West 4th Avenue Hialeah. Florida 33012 Telephone No. (305) 883-6600 Florida Bar No. 181663