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PICK-UP WAIT MAIL

(Business Entity Name)

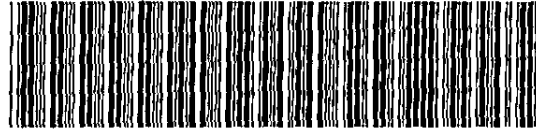
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REGISTRY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: CONCH BROTHERS LAWN CARE, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: A BETTER BUSINESS & TAX SERVICE
Name (Printed or typed)

600 Goodlette Road North, Ste. 104
Address

Naples, FL 34102
City, State & Zip

941-263-0829
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
Of
CONCH BROTHERS LAWN CARE, INC.

The undersigned, for the purposes of forming a Corporation under Section 607.164 of the Florida General Corporation Act, do hereby certify as follows:

Article I
Corporate Name and Address

The name of the Corporation is **CONCH BROTHERS LAWN CARE, INC.**, and the street address of the Corporation is:

3241 11TH AVENUE SW
NAPLES, FLORIDA 34117

Article II
Corporate Purposes

The Corporation is organized to function as **LAWN CARE** and any related business services and to otherwise engage in any activity or business permitted under the laws of the United States of America and in the state of Florida.

Article III
Authorized Stock

The aggregate number of shares of the Corporation shall be 50,000, of which 1,000 are to be issued as voting common stock with a par value of \$1.00.

Article IV
Registered Office and Registered Agent

The street address of the initial registered office of the Corporation in the state of Florida shall be:

3241 11TH AVENUE SW
NAPLES, FLORIDA 34117

The name of the initial registered agent of the Corporation at the registered office shall be **MATTHEW M. SCHLESNA**.

Article V
Initial Board of Directors

The initial Board of Directors of the Corporation shall be comprised of **TWO (2)** person(s). The name and address of the initial Director(s) is as follows:

| <u>NAME</u> | <u>ADDRESS</u> |
|---------------------|----------------------------------------------------------|
| MATTHEW M. SCHLESNA | 3241 11 TH AVENUE SW NAPLES, FLORIDA 34117 |
| MARK B. SCHLESNA | 3241 11 TH AVENUE SW NAPLES, FLORIDA 34117 |

Article VI
Incorporator

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


MATTHEW M. SCHLESNA
3241 11TH AVENUE SW
NAPLES, FLORIDA 34117

Article VII
Commencement of Existence

The Corporation shall be deemed to commence on the 18TH day of **FEBRUARY, 2005.**

Article VIII
Duration

The term of existence of the Corporation is perpetual. IN WITNESS WHEREOF, the undersigned, as Incorporator has executed the foregoing Articles of Incorporation this 14TH day of FEBRUARY, 2005.

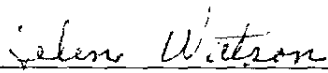


MATTHEW M. SCHLESNA
Incorporator

STATE OF FLORIDA

COLLIER COUNTY

Before me personally appeared **MATTHEW M. SCHLESNA** to me personally known to be the person described as Incorporator and who executed the foregoing Articles of Incorporation and acknowledged before me that he subscribed to these Articles of Incorporation this 14TH day of **FEBRUARY, 2005**.



Notary Public, Helen Watson
My Commission Expires: 08-13-2005



Helen Watson
MY COMMISSION # DD031175 EXPIRES
August 13, 2005
BONDED THRU TROY FAIN INSURANCE, INC

**ACCEPTANCE OF REGISTERED AGENT
FOR**

CONCH BROTHERS LAWN CARE, INC.

I, **MATTHEW M. SCHLESNA**, having signed the within as registered agent of **CONCH BROTHERS LAWN CARE, INC.**, (the Corporation) at the registered address of **3241 11TH AVENUE SW, NAPLES, FLORIDA 34117**, do hereby agree as the registered agent to accept service of process, to keep an office of the Corporation open during the prescribed hours, and to post my name, **MATTHEW M. SCHLESNA**, and that of any officer of the Corporation authorized to accept service of process at the above Florida designated address, in some conspicuous place in the office of the Corporation as required by law.



MATTHEW M. SCHLESNA
Registered Agent

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TALLAHASSEE, FLORIDA