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(Requestor's Name)	_		
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(City/State/Zip/Phone #)	<b>-</b>		
PICK-UP WAIT MAIL			
(Business Entity Name)	_		
(Dualities Chary Harrie)			
(Document Number)			
Certified Copies Certificates of Status	-		
Special Instructions to Filing Officer:	7		
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SEGRELANY OF STATE
TALL AHASSEE, FLORIDA

10/4/05/L

## **COVER LETTER**

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

SUBJECT: BC Lawns, Inc.			
(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:	
<b>▼</b> \$70.00 \$78.75	\$78.75	\$87.50	
Filing Fee Filing Fee	Filing Fee	Filing Fee,	
& Certificate of Status	& Certified Copy	Certified Copy	
		& Certificate of	
		Status	
	ADDITIONAL COPY REQUIRED		
	<del></del>		
Charles Cuiffin			
FROM: Charles Griffin Name (Printed or typed)			
trame (Tinted of typed)			
125 East Chapman Rd			
Address			
Lutz, Florida 33549			
	State & Zip	<del></del>	
813.951.2933			
Daytime To	elephone number	<del></del>	

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

## ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

The name of the corporation shall be:

BC Lawns, Inc.

05 OCT -3 AM 9: 32 SECRETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

125 East Chapman Rd., Lutz, Florida 33549

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Lawn Maintenance

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Charles Griffin, Pres. 125 East Chapman Rd., Lutz, Florida 33549 Elizabeth Griffin, Vice Pres. 125 East Chapman Rd., Lutz, Florida 33549

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Charles Griffin, 125 East Chapman Rd., Lutz, Florida 33549

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charles Griffin, 125 East Chapman Rd., Lutz, Florida 33549

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

Signature/Registered Agent

Signature/Incorporator

Data

Date.

Date