P95000035045

749 Eagle Way
North Palm Beach, Florida 33408
407/845-6829

April 21, 1995

200001467932
-04/28/95--01035--003
****122.50 ****122.50

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: BLUEGRASS LAWN CARE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 28 PM 2:44

Gentlemen:

Enclosed please find Articles of Incorporation for Bluegrass Lawn Care, Inc., along with my check in the amount of $122.50 to cover the cost of filing the articles with the Division of Corporations.

Please advise me if anything further is required.

Sincerely,

Mary Annis

Mary Annis

Mary Annis Dec
OK to correct Art VIII
KE 5/3

EFFECTIVE DATE
4-21-95

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 28 PM 2:44

ARTICLES OF INCORPORATION

OF

Bluegrass Lawn Care, Inc.

ARTICLE I

The name of the corporation is Bluegrass Lawn Care, Inc.

ARTICLE II

This corporation's existence shall become effective as of April 21, 1995.

ARTICLE III

The corporation is organized for the purpose of transacting any or all lawful business for which corporations may be organized under the Florida Business Corporation Act of the State of Florida.

ARTICLE IV

The mailing address of the principal place of business of the corporation is 749 Eagle Way, North Palm Beach, Florida 33408.

ARTICLE V

The aggregate number of shares which the corporation shall have authority to issue is 1,000 shares, par value $.01 per share.

ARTICLE VI

The street address of the initial registered office of the corporation is 749 Eagle Way, North Palm Beach, Florida 33408. The name of the initial registered agent of the corporation at that address is Mary Annis.

ARTICLE VII

The initial Board of Directors shall consist of one member who shall be Mary Annis, whose address is 749 Eagle Way, North Palm Beach, Florida 33408. The number of directors may be increased or decreased from time to time in the manner provided in the bylaws of the corporation.

EFFECTIVE DATE
4-21-95

ARTICLE VIII

The name and address of the incorporator of the corporation is Mary Annis, 749 Eagle Way, North Palm Beach, Florida 33408.

IN WITNESS WHEREOF, the incorporator has executed these Articles of Incorporation on April 21, 1995.

I accept designation as Registered Agent.

Mary B. Annis

Mary Annis

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 28 PM 2:44

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
96 NOV -4 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000035045

1 Corporation Name

BLUEGRASS LAWN CARE, INC.

Principal Place of Business	Mailing Address
749 EAGLE WAY NORTH PALM BEACH FL 33408	749 EAGLE WAY NORTH PALM BEACH FL 33408

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 96 90

2 New Principal Office Address, If Applicable		3 New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 04/21/1995

5. FEI Number: 65-0591137 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres	JEFFREY ANNIS	749 EAGLE WAY NPB, FL	NPB, FL
Sec	MARY ANNIS	749 EAGLE WAY	NPB, FL
			800UID20009S8--7 -11/08/96--01106--002 ****375.00 ****375.00

8. Name and Address of Current Registered Agent

ANNIS, MARY
749 EAGLE WAY
NORTH PALM BEACH FL 33408

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City | State: FL | Zip Code

CR2E040 (7/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: X Mary Annis SIGNED — REGISTERED AGENT MUST SIGN

Date: 10/31/96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: X Mary Annis SIGNED — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 10/31/96

Daytime Phone #