۲.	DI FASE DEAL	ALLINSTRUC	TIONS BEFORE (COMPLETING THIS	DDM	
AP	PLICATION	FLORIDA DEF Sandr Secre	ARTMENT OF STATE B. Mortham Stary of State OF CORPORATIONS		10 AHII: 09	
DOC!	UMENT # G814	88		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
WEILAI	ND'S QUALITY LAWN	MAINTENANCE	rann	0	SEE, FLORIDA	
P.O. BOX 1046		Malling Address *W HNDUSTIRAL AVE 67 P.O. BOX 1046 BOYNTON BEACH FL 3				
2. New Pri	addresses are incorrect in any way, line inclpal Office Address, If Applicable	3. New Mailing Office	n and enter correction below. Address, If Applicable	Date Incorporated or Qualified To Do Business In Florida	01/31/1984	
Sulte, Apt. #, etc. City & State		Sulte, Apt. #, etc. City & State		5. FEI Number 59-2368097	Applied For Not Applicable	
Zip	Country	33425-10	Country	6. CERTIFICATE OF STATUS DESIRE	\$8.75 Additional Fee required for a Certificate of Status	
7. Names Title(s) 1 PVT			rofit corporations must list at lea Street Address of Each Officer and/or Director (Do NOT Use Post Office Box I W 14TH STREET	reet Address of Each fficer and/or Director Jse Post Office Box Numbers) 4 City / State / Zip		
8	WEILAND, ELLEN 254		W 14TH STREET	BOYNTON BEAC	BOYNTON BEACH FL	
			A dept.	0000023 -11/13/ ****16	3467202 9701085009 5.00 ****165.00	
	2 Name and Address of Curro	at Pagistared Agent		O Name and Address of Nam Do		
2540 S	8. Name and Address of Current ND, ELLEN W 14TH ST. 103 ON BCH. FL 33428	r nafhsralan vijeur		Street Address (P.O. Box Number is Not Acceptable) Sulte, Apt. #, Etc.		
10. I, being Signature of Registered	Agent Company	bove named corporation, a		bligations of Section 607.0505, F.S.		
	is corporation owes or angible Personal Prope			No 🗌 (See	other side for information on intangible tax.)	
this rein owed by	that I am an officer or director or the re- istatement application, the reason for die y the corporation have been paid and the application is true and accurate, and my	ssolution has been eliminate e names of Individuals liste	ed, the corporate hame satisfies d on this form do not qualify for	the requirements of section 607.0401 an exemption under section 119.07(3	or 617.0401, F.S., that all fees	
SIGNA	TURE: SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING	OFFICER OR DIRECTOR	10-29-97	(56) 734-0183 Daysime Phone #	



WEILAND'S QUALITY LAWN 19 2012 MAINTENANCE, INC.

P.O. Box 1046 Boynton Beach, Fl 33425-1046 Phone:(561)734-0983 Pax:(561)369-3639

10-29-97

Florida
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, F1. 32314-6327

Annual Report/Reinstatement Section:

This letter is follow up from my phone call to this department. Our company had not received the annual report or reminder notice due for September. According to your records, you can see, we have not filed late or had this problem before. We apologize for not realizing this was not received by our company. We have been through all our files and had not received these. Our mailing address is the P.O. Box address, the other address is to a Multi-company warehouse and should not be used for mailing please. Per our conversation, I am writing this letter that the annual reports were not received and the check for \$165.00 is enclosed. We will notify this office if we do not receive the next annual report form. Thank You for your time and please call if you have any questions or problems.

Sincerely,

Ellen Weiland

(Secretary of Corp.