<ol> <li>Corporation</li> </ol>	MENT # J258 NAME AND LANDSCAPING	55 (4	FLORIDA DEPARTMENT OF STATE Sandra B Mortham Socretary of State DIVISION OF CORPORATIONS			
Principal Place o	AWN AND LANDSCAPING	-	·)			
2600 NW 106		G, INC.				
2600 NW 106	of Rusiness					
UUKAL SPHI	6 AVE.	Mailing Address 2600 NW 106 AV	2600 NW 106 AVE.		arını törüt Bélül Gili Elül	) minni muðri gikli bifili blíti fiðbl
	INGS FL 33065	CORAL SPRINGS	FL 33065			
2. Principal Plac	oo of Puringer	····		<ol> <li>Date Incorporated or 07/25/1986</li> </ol>	Qualified 3a. Da	te of Last Report 02/28/1995
21		2a. Mailing Address				Applied For
Suite, Apt #,	, etc.	Suite, Apt. #, etc		59-2722256 5. Certificate of Status E	~	Not Applicable \$8.75 Additional
City & State		City & State		6. Election Campaign Fir	nancing	Fee Required \$5.00 May Be
Zip 24	Country 25	Zip	Country	Trust Fund Contribute  8. This corporation has i	J11	Added to Fees tax under s 199.032
	9. Name and Address of Curr	29 ent Registered Agent	30	florda Statutes  10. Name and Address	🗌 Yes 🗶 No	
2600 NW	S, KENNETH V 106 AVE SPRINGS FL 33065		82 St	eet Address (P.O. Box Number is Not	Acceptable)	
SIGNATURE	and accept the obligations of, Sec	otron: 607.0506, Florida Statu	Mules, the above name prized by the corporati	d corporation submits this statement f n's board of directors. I nereby accep	or the purpose of ch titre appointment as	85 Zip Code langing its registered office s registered agent. Lam
12.	graf rell Nood or protectinal lie of registers age OFFICERS AI	Califficita; Crahe ND DIRECTORS	INDIE Ragiforal Agents giv		DATE	
TITLE	VT Perkins, Debra	DELETE	13.	ADDITIONS/CHANGES		D DIRECTORS IN 12  Change Addition
STREET ADDRESS	2600 NW 106 AVE CORAL SPRINGS FL		1.2 NAME   1.3 STREET ADÚR	SS		D DIRECTORS IN 12 Change Addition
CITY - ST - ZIP TITLE	PS PRINGS FE	☐ DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		<del></del>	
NAME STREET ADDRESS	PERKINS, KENNETH 2600 NW 106 AVE.		2.2 NAME		ľ	Change Addition   (
CITY - ST - ZIP	CORAL SPRINGS FL		2.3 SIREET ADDRI 2.4 CITY - SI - ZIP			
NAME		☐ DEFELE	3 1 TITLE 3 2 NAME		[	Change Addition
STREET ADDRESS			33 STREET ADOR	3S		
ITLE		☐ DELETE	4 1 TITLE			Change Addition
IAME ITRÉET ADDRESS			4.2 NAME			7
ITY - ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.3 STREET ADDRE	S		
ITLE AME		☐ DELETE	5 1 F TLE			Change
TREET ADDRESS			5.2 NAME 5.3 STREET ADDRE			
TLE		DELETE	5.4.C/TY - S1 - ZIP			
AME			6 1 T-TLF 6 2 NAME			Change
TREET ADDRESS TY-ST-ZiP			6 3 STHEFT ADORES			
4. I do hereby cer	ertify that the information supplied v	vito this filing is voluntarily for	64C1Y-SI-ZiP	Jalify for the exemption stated in Section	on 110 0 (0)(1) F:	
	information indicated on this annu- i an officer or director of the corpo- ick 12 or Block 13 if changed, or c			ualify for the exemption stated in Secti accurate and that my signature shall bute this report as required by Chapter	on 119.07(3)(k), Flor ave the same legal 6 .607 : Florida Staties	da Statutes. I further offect as if made under