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TRANSMITTAL LETTER  
FILED

00 JUL -7 PM 2: 26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

100003316281--8  
-07/07/00--01065--009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: THREE PALMS, 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: BENJAMIN L WELLS  
Name (Printed or typed)

P.O. BOX 61634  
Address

Jacksonville FL, 32236  
City, State & Zip

904 518 1058  
Daytime Telephone number

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

7/10/00

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be: **THREE PALMS, INC.**

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**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: **P.O. BOX 61634  
Jacksonville, FL  
32236-1634**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **Landscape Contractor**

**ARTICLE IV SHARES**

The number of shares of stock is: **10,000**

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es): **KELLY WELLS**  
**BENJAMIN L WELLS  
1373 INGLESIDE AVE  
Jax, FL. 32205**

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is: **Benjamin L Wells  
1373 Ingleside Ave  
Jacksonville, FL  
32205**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: **BENJAMIN L WELLS  
1373 INGLESIDE AVE  
Jacksonville, FL  
32205**

\*\*\*\*\*  
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

**6-30-00**  
Date

  
Signature/Incorporator

**6-30-00**  
Date