TRANSMITTAL LETTER

P00000099276

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

SUBJECT: M&E Lawn Care.

600003433456--9 -10/20/00--01041--004 *****78.75 *****78.75

(PROPOSED CORPORA)	E NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed is an original and one(1) copy of the article \$70.00 \times \frac{1}{2} \$78.75 Filing Fee Filing Fee	s of incorporation and a \$78.75 Filing Fee	check for:	20 M 8:3
& Certificate of Status	& Certified Copy ADDITIONAL CO	Certified Copy & Certificate of Status	A CONTRACTOR
FROM: <u>Unthia</u> Li	nted or typed)	· .	
10938 Bugg	J. Whip Dr	ive	

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

A3,23

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:
ARTICLE I NAME The name of the corporation shall be M&E LAWN Case, Inc.
The name of the corporation shall be
M& E LAWN Care, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be
10938 Buggy Whip Dr.
Jacksonville, FL 32257
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100 (One hundred)
100 (Othe unitaled)
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:
Cynthia Little.
10938 Buggy Whip Dr.
Jacksonville, FL 3225 ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
Cynthia Little -
Jacksonville, FL 32257
$\bigcap_{i=1}^{n} A_i = A_i$
- Unthia State. 10/19/00
Signature/Incorporator Date
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(An additional article must be added if an effective date is requested.)
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
provisions of all statules relating to the proper and complete performance of my duties, and I am familiar with and accept the
obligations of my position as registered open!
Signature/Registered A peri
Date
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