

TRANSMITTAL LETTER

P010000016722

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

FILED  
01 FEB 12 AM 11:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: LAVENDER SERVICES, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800003674128--0  
-02/12/01--01061--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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: JENNIFER L. SMITH  
Name (Printed or typed)

317 GOLDENROD COURT PO BOX 1155  
Address

NICEVILLE, FL 32588  
City, State & Zip

850-729-2592  
Daytime Telephone number

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

2-14-01

## 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: LAVENDER SERVICES, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: PO BOX 1155, NICEVILLE, FL 32588

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE SMALL BUSINESS  
BOOKKEEPING AND PAYROLL SERVICES

### ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES OF COMMON STOCK

### ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

JENNIFER L. SMITH, PRESIDENT  
317 GOLDENROD COURT  
NICEVILLE, FL 32578

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JENNIFER L. SMITH  
317 GOLDENROD COURT  
NICEVILLE, FL 32578

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JENNIFER L. SMITH  
317 GOLDENROD COURT  
NICEVILLE, FL 32578

.....  
*Having been named as a registered agent to accept services 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

2/9/01  
Date

  
\_\_\_\_\_  
Signature/Incorporator

2/9/01  
Date

FILED  
01 FEB 12 AM 11:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA