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Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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From:

(:\_\_\_\_\_

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Account Name	:	STANLEY A.	GOLDSMITH,	ATTORNEY	AT	LAW
Account Number	. :	1200000000	59			
Phone		(941)955-49	90			
Fax Number	:	(941)955-49	97			

# FLORIDA PROFIT CORPORATION OR P.A.

AMERICAN TREE & LANDSCAPE SERVICES, INC.

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FROM S GOLDSMITH ATTY 941 955 4997

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## ARTICLES OF INCORPORATION

of

## AMERICAN TREE & LANDSCAPE SERVICES, INC.



## FIRST:

The name of the Corporation shall be AMERICAN TREE & LANDSCAPE SERVICES, INC. INC. The principal mailing address of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

## SECOND:

The purposes for which the Corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

#### THIRD:

The Corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

## FOURTH:

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

## FIFTH:

The Registered Agent for the Corporation shall be:

STANLEY A. GOLDSMITH 1605 Main Street, Suite 1001 Sarasota, Florida 34236

## SIXTH:

To the Incorporator of AMERICAN TREE & LANDSCAPE SERVICES, INC .:

I understand my obligations as your Registered Agent and hereby accept appointment as your Registered Agent in accordance with F.S. 48.091.

Stanley A. Goldsmith

#### SEVENTH:

The initial Board of Directors of the Corporation shall consist of one (1) Member:

JAMES J. HETMAN 1605 Main Street, Suite 1001 Sarasota, Florida 34236 P. 3

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## EIGHTH:

The incorporator of AMERICAN TREE & LANDSCAPE SERVICES, INC., who by his signature hereby acknowledges the adoption of these Articles of Incorporation, is:

STATE OF FLORIDA ) COUNTY OF SARASOTA ) 55:

The foregoing Articles of Incorporation of AMERICAN TREE & LANDSCAPE SERVICES, INC., were acknowledged before me this ff day of ff 2029, by STANLEY A. GOLDSMITH as Registered Agent. He is personally known to me or has produced \_\_\_\_\_\_\_ as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.



Signature of Notary Public

Print Name of Notary Public I am a Notary Public of the State of , and my commission

expires on

ature of Notary Public

Print Name of Notary Public I am a Notary Public of the State of , and my commission

expires on



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