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TRANSMITTAL LETTER

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

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-05/11/01--01080--003
*****78.75 *****78.75

SUBJECT: La beau Lawn Maintenance 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Brett Lebeau
Name (Printed or typed)

3023 Custer Ave
Address

Lake Worth FL 33467
City, State & Zip

561 434 5533
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 MAY 11 AM 9:09

FILED

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

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:

Labeau Lawn Maintenance Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

3023 Custer Ave
Lake Worth, FL 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate Lawn Maint Company

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

Brett Labeau President
3023 Custer Ave
Lake Worth, FL 33467

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Brett Labeau
3023 Custer Ave
Lake Worth FL 33467

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Kerry Mercatante
900 Einton Blvd #204
Delray Beach FL 33444

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Brett Labeau
Signature/Registered Agent

5/7/01
Date

Kerry Mercatante
Signature/Incorporator

5/7/01
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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