*P01000101247*

## TRANSMITTAL LETTER

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

SUBJECT: __Treasures Landscape & Lawn Care, Inc.__
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ $70.00        ☑ $78.75
Filing Fee       Filing Fee
                 & Certificate of Status

☐ $78.75              ☐ $87.50
Filing Fee            Filing Fee,
& Certified Copy      Certified Copy
                      & Certificate of
                      Status

**ADDITIONAL COPY REQUIRED**

FROM: __Holland & Lamoureux, P.A.__
Name (Printed or typed)

__207 W. Morgan Street__
Address

__Brandon, FL 33510__
City, State & Zip

__(813) 655-9069__
Daytime Telephone number

FILED
01 OCT 17 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

10-18-01

# ARTICLES OF INCORPORATION
## OF
## TREASURES LANDSCAPE & LAWN CARE, INC.

## ARTICLE I

The name of the corporation is: TREASURES LANDSCAPE & LAWN CARE, INC.

## ARTICLE II

The principal place of business and mailing address is: 2607 Durant Road, Valrico, Florida 33594.

## ARTICLE III

The purpose of the corporation is to provide landscape and lawn care services.

## ARTICLE IV

The number of shares of stock is one hundred (100) shares.

## ARTICLE V

Dewey G. Buxton, President, 334 Hollow Tree Drive, Seffner, Florida 33584.

## ARTICLE VI

The name and Florida street address of the registered agent is : Anne Buxton, 334 Hollow Tree Drive, Seffner, Florida 33584.
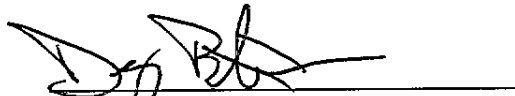
## ARTICLE VII

The name and address of the Incorporator is: Dewey G. Buxton, 334 Hollow Tree Drive, Seffner, Florida 33584.

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.

_____
**Signature of Registered Agent**

_____10—15—01_____
**Date**

_____
**Signature of Incorporator**

_____10/9/01_____
**Date**