## TRANSMITTAL LETTER O COOC S Department of State

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

| SUBJECT: PERFECT (  | SREEN LAUN & LAND SCAPTAGE GRP.  |  |  |  |
|---|--|--|--|--|
| (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)   |  |  |  |  |
| 600046609669<br>-10/31/0101043011<br>*****78.75 *****78.75                                |  |  |  |  |
| Enclosed is an original and one(1) copy of the articles of incorporation and a check for: |  |  |  |  |
| \$70.00 \$78.75 Filing Fee & Certificate of Status  | \$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status, ADDITIONAL COPY RECURRED |  |  |  |
| FROM: RTCKY NECSON ASSET TO Name (Printed or typed)  1015 NW 130 STREET STATES OF Address |  |  |  |  |
| M. MIAME FL 33168 City, State & Zip   |  |  |  |  |
| (305) 4(9-3945 on (305) 769-3997  Daytime Telephone number                                |  |  |  |  |

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

9/11/

|  |  | -               |   |  |
|--|--|-----------------|---|--|
| į. <b>š</b>  | ADTICLES OF INCORDODATION  |                 |   |  |
|  | ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)   |                 |   |  |
| خاع  |  | * *             |   |  |
|  | ARTICLE I NAME The name of the corporation shall be:   |                 |   |  |
|  | PERFECT GREEN LAWN & LANDSCAP.   | PNC             | CORP.   |  |
|  | TELL COPEEN COUNTY CONTRACTOR  | J. ()           | Corei.  |  |
|  | ARTICLE II PRINCIPAL OFFICE  | <i>4</i> : ▼    |   |  |
|  | The principal place of business/mailing address is:  10 15 NW 130 57 RECT  |                 |   |  |
|  | N. n FAMI FL. 33168  |                 |   |  |
|  | ARTICLE III PURPOSE  |                 | 75 O  |  |
|  | The purpose for which the corporation is organized is:   |                 |   |  |
|  |  |                 | 33 L  |  |
|  |  |                 | CT 31 PM 2:54 OCT 31 PM 2:54 ECRETARSEE, FLORIT |  |
|  | ARTICLE IV SHARES The number of shares of stock is: 100  | r               | ELST ST   |  |
|  | The number of shares of stock is.  |                 | ROLL OF   |  |
|  | ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)  |                 |   |  |
|  | The name(s) and address(es):   |                 |   |  |
| RESEDEN  | F) RICKY NELSON = 1015 NW 130 STREET   | N. MIA~         | J FC. 33/68                                     |  |
| VICE RO  | ) LAHOMA NELSON = GAME ABOVE   | ·               | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,         |  |
| TRE)   | LAHOMA NELSON= SAME ABOVE  |                 |   |  |
|  | ARTICLE VI REGISTERED AGENT  |                 |   |  |
| The <u>name and Florida street address</u> of the registered agent is: |  |                 |   |  |
|  | RICKY NELDON 1015 N.W. 130 St.<br>N. Miami, FL. 3316   | ^               |   |  |
|  | 1V- Miami, TI. 5516.   | <u> </u>        |   |  |
|  | ARTICLE VII INCORPORATOR   |                 |   |  |
|  | The name and address of the Incorporator is:   |                 |   |  |
|  | KICKY NELSON= SAME ABOVE   |                 |   |  |
|  |  |                 |   |  |
|  | *********************  | ******          | ******  |  |
|  | Having been named as registered agent to accept service of process for the above stated of certificate, I am familiar with and accept the appointment as registered agent and agree to   | orporation at t | the place designated in this                    |  |
|  | and the state of t | •               | •   |  |
| . (د   | White I Nh   | 10/2            | 10/24/01  |  |
| 7  | Signature/Registered Agent   | Date            | ( )   |  |
|  | 1/6 - 1/1  | · · ·           | 10/14/21  |  |

Date

Signature/Incorporator