

TRANSMITTAL LETTER

PO2000036958

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

SUBJECT: A CLASS Act LANDSCAPING AND Home Improvement
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) INC

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: Anthony J Serpico
Name (Printed or typed)

5047 CAPE ELIZABETH CT W.
Address

JACKSONVILLE, FL 32277
City, State & Zip

(904) 743-6514
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 4 PM 3:09

APPROVED
AND
FILED

100005193281--1
-04/04/02--01065--011
*****175.00 *****87.50

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

gc 4/4

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:

A CLASS Act LANDSCAPING AND HOME Improvement INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5047 CAPE ELIZABETH CT W.
JACKSONVILLE, FL 32277

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LANDSCAPING & HOME Improvement S

ARTICLE IV SHARES

The number of shares of stock is: /

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Anthony J Serpico , President

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/2 APR -4 PM 3:09

APPROVED
AND
FILED

ARTICLE VI REGISTERED AGENT

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

BARBARA A. OMAN
5047 CAPE ELIZABETH CT. W.
JACKSONVILLE, FL 32277-3221

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BARBARA A. OMAN
5047 CAPE ELIZABETH CT W.
JACKSONVILLE, FL 32277-3211

Having been named as registered agent to accept service 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

Barbara A Oman
Signature/Registered Agent

4-4-02
Date

Barbara A Oman
Signature/Incorporator

4-4-02
Date