

P02000048769  
(SAMPLE LETTER OF TRANSMITTAL)

FILED

Date

02 APR 29 AM 11:24

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: GULF STATES TREE SUPPLIERS, Inc.  
(name of corporation)

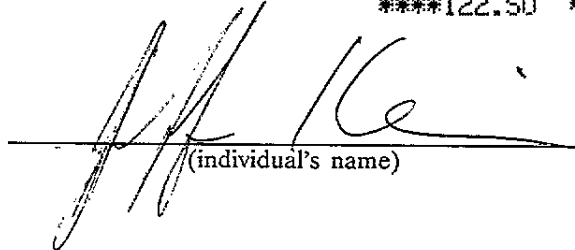
Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

400005369584--3  
-04/29/02--01091--002  
\*\*\*122.50 \*\*\*\*78.75

  
(individual's name)

GULF STATES TREE SUPPLIERS, INC.  
(name of corporation)

MAILING ADDRESS OF CORPORATION

26205 S.W. 194 AVE		
HOMESTEAD, FL 33031		
PHONE		
(305)	247-2161	
Area Code	Number	Ext.

# ARTICLES OF INCORPORATION

GULF STATES TREE SUPPLIERS, INC  
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

## ARTICLE I - CORPORATE NAME

The name of the corporation is:

GULF STATES TREE SUPPLIERS, INC

## ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

## ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

## ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue THREE THOUSAND shares ( 3000 ) of ONE Dollar(s) (\$ 1.00 ) par value Common Stock, which shall be designated "Common Shares."

## ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>GULF STATES TREE SUPPLIERS, INC</u>		
ADDRESS	<u>26205 S.W. 194 AVE</u>		
CITY	<u>HOMESTEAD</u>	FLORIDA	ZIP <u>33031</u>

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>JEFF KLEIN</u>		
ADDRESS	<u>26205 S.W. 194 AVE</u>		
CITY	<u>HOMESTEAD</u>	FLORIDA	ZIP <u>33031</u>

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE ( 1 ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>JEFF KLEIN</u>		
ADDRESS	<u>26205 S.W. 194 AVE</u>		
CITY	<u>HOMESTEAD</u>	STATE <u>FL</u>	ZIP <u>33031</u>
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

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TALLAHASSEE, FLORIDA



CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

GULF STATES TREE SUPPLIERS, INC  
(name of corporation)

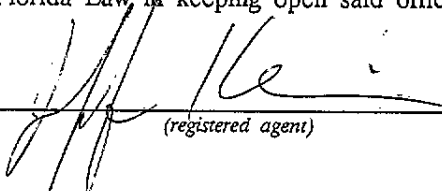
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, desiring to organize under the laws of the State of Florida with  
its registered office as indicated in the Articles of Incorporation

at 26205 S.W. 194 AVE  
HOMESTEAD, FL 33031

has named JEFF KLEIN  
located at the aforesaid address, as its Registered Agent to accept service of process  
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above  
stated corporation at the place designated in this certificate, and being familiar with  
the obligations of that position, I hereby accept to act in this capacity, and agree to  
comply with the provisions of Florida Law in keeping open said office.

  
(registered agent)