Division of Corporations Poly 2000075103 age 1 of 2

### Florida Department of State

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Account Number : 104662003400\_ Phone : (516)935-3940 Fax Number : (516)935-3088 SECRETARY OF STATE TALLAHASSEE FLORINA

#### FLORIDA PROFIT CORPORATION OR P.A.

TRU-CUT Lawn Care, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

TRU-CUT Lawn Care, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

TRU-CUT Lawn Care, Inc. 5015 Karen Street Fernandina Beach, FL 32034

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

A. Jeffrey Tomassetti, Esq. 406 Ash Street Fernandina Beach, FL 32034

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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## ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Shawn M. Adams 5015 Karen Street Fernandina Beach, FL 32034

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

8th day of July 2001.

Shawii M. Adams - Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	TRU-CUT Lawn Care, Inc.	·
2. The name and address of the register	red agent and office is:	SECIETALLAHA
	A. Jeffrey Tomassetti, Esq.	
	Name	FS B D
	406 Ash Street	D PN 3: 36 PSTATE FLORIDA
	(P.O. Box or Mail Drop Box NOT Acceptable)	38 DA
	Fernandina Beach, FL 32034 (City / State / Zip)	<u>.</u>

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

A. Jeffrey Tomassetti, Esq. SIGNATURE

July 8th, 2002

(Date)