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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 AUG -1 AM 11: 41

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

SUBJECT: _Artifice Tree Service, Inc_
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

700006852257--5
-08/01/02--01041--001
*****78.75 *****78.75

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
ADDITIONAL COPY REQUIRED

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

FROM: _Michael L Gibson_
Name (Printed or typed)

12606 Gamble Rd
Address

Monticello, Fla 32344
City, State & Zip

_850-997-1701 - 997-7150_
Daytime Telephone number

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

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: Artifee Tree Service, Inc

ARTICLE II   PRINCIPAL OFFICE
The principal place of business/mailing address is:

12606 Gamble Rd
Monticello, Fla 32344

ARTICLE III   PURPOSE
The purpose for which the corporation is organized is:

ARTICLE IV   SHARES
The number of shares of stock is: 100.00

ARTICLE V   INITIAL OFFICERS/DIRECTORS (optional)
The name(s), address(es) and title(s):

ARTICLE VI   REGISTERED AGENT
The **name and Florida street address** of the registered agent is:

Michael Lee Gibson
12606 Gamble Rd
Monticello, Fla 32344

ARTICLE VII   INCORPORATOR
The **name and address** of the Incorporator is:

Michael L Gibson
12606 Gamble Rd
Monticello, Fla 32344

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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

Michael L Gibson   08/01/02
Signature/Registered Agent   Date

Michael L Gibson   08/01/02
Signature/Incorporator   Date