TRANSMITTAL LETTER

## P0200092399

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

SUBJECT:

(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	<del>-</del>
Enclosed is an original and one(1) copy of the article	es of incorporation and a	a check for :	
Filing Fee \$78.75  Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:Name (Pr	rinted or typed)	THE COLOR	3
SEMIX	Address  With Table & Zip	TCRETARY OF STATE AND STAT	
( - )	·	30 TiDA	

W-23859

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

BM 8/26

Ter is



Jim Smith
Secretary of State

August 16, 2002

DOUGLAS STEWART 12248 MONARCH CIR SEMINOLE, FL 33772

SUBJECT: TROPIC GARD Ref. Number: W02000023859

We have received your document for TROPIC GARD and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight
Document Specialist
New Filing Section

Letter Number: 402A00048622

ADTICI ES OF INCORPÓR ATIC	4 () 2	-
In compliance with Chapter 607 and/or Ch	ON	
In compliance with Chapter 607 and/or Ch	apter 621, F.S. (Profit)	
ARTICLE I NAME		
The name of the corporation shall be:	¢	
	Taxaga da	
	TROPIC GARD INC.	
ARTICLE II PRINCIPAL OFFICE	•	
The principal place of business/mailing addr		
•	12537 V'UNERTON KO	-:
	ress is: 12537 ULMERTON Ro LARGO FL 33774	
ARTICLE III PURPOSE	22771	
The purpose for which the corporation is or	rganized is:	
	200926	
ARTICLE IV SHARES		
The number of shares of stock is:		
/	<i>1</i> 00	
4 DON'CL TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE	<del></del> -	
ARTICLE V INITIAL OFFICERS	DIRECTORS (optional)	
The name(s), address(es) and title(s):	DIRECTORS (optional)	
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12248 Moriances	t Ca	
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