

Division of Corporations

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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850)205-0381

## From:


Account Name : A. BERNARD BOOKKEEPING & TAX SERVICE, INC.  
Account Number : 071162000147  
Phone : (305) 251-4591  
Fax Number : (305) 251-1975

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H. H. H.  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

## FLORIDA PROFIT CORPORATION OR P.A.

Howard's Lawn &amp; Maintenance Service, Inc.



Certificate of Status	1
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**ARTICLES OF INCORPORATION**

**HOWARD'S LAWN & MAINTENANCE SERVICE, INC.**  
(Name of corporation)

THE UNDERSIGNED SUBSCRIBER (S) TO THESE ARTICLES OF INCORPORATION, NATURAL PERSON (S) COMPETENT TO CONTRACT, HERBY FORM A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA.

**ARTICLE I - CORPORATE NAME**

THE NAME OF THE CORPORATION IS: HOWARD'S LAWN & MAINTENANCE SERVICE, INC.

PHYSICAL & MAILING ADDRESS

**HOWARD'S LAWN & MAINTENANCE SERVICE, INC.**  
**10515 SW 161<sup>ST</sup> TERRACE**  
**MIAMI, FLORIDA 33157**

**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 FIVE HUNDRED SHARES (500) OF ONE DOLLAR (\$) (\$1.00) PAR VALUE COMMON STOCK, WHICH SHALL BE DESIGNATED "COMMON SHARES".

**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT**

THE NAME AND STREET ADDRESS OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION IS:

NAME	ANTHONY BERNARD
ADDRESS	9032 SW 152 <sup>ND</sup> STREET
CITY/STATE/ZIP	MIAMI, FL. 33157

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A. Bernard Financial Services, Inc.  
9032 Sw 152<sup>nd</sup> Street  
Miami, Florida 33157  
(305) 251-4591

**ARTICLE VI - BOARD OF DIRECTORS**

THIS CORPORATION SHALL HAVE ONE (1) DIRECTOR (S) 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	HOWARD DIXON (PRESIDENT)
ADDRESS	10515 SW 161 <sup>ST</sup> STREET
CITY/STATE/ZIP	MIAMI, FLORIDA 33157

**ARTICLE VIII - INCORPORATORS**

THE NAMES AND ADDRESSES OF THE PERSON (S) SIGNING THESE ARTICLES OF INCORPORATION ARE AS FOLLOWS:

NAME	HOWARD DIXON
ADDRESS	10515 SW 161 <sup>ST</sup> STREET
CITY/MIAMI/ZIP	MIAMI, FLORIDA 33157

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER (S) HAVE EXECUTED THESE ARTICLES OF INCORPORATION THIS THE 5<sup>TH</sup> DAY OF SEPTEMBER 2002.

  
\_\_\_\_\_  
(SEAL)

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**STATE OF FLORIDA  
COUNTY OF DADE**

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGEMENTS IN THE STATE AND COUNTY SET FORTH ABOVE, PERSONALLY APPEARED

HOWARD DIXON

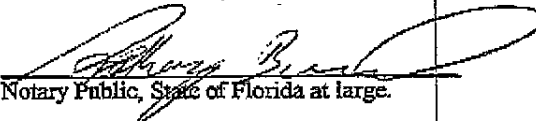
KNOWN TO ME AND KNOWN TO BE THE PERSON (S) WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND WHO ACKNOWLEDGED BEFORE ME THAT SHE EXECUTED THESE ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, I HAVE HEREUNTO AFFIXED MY HAND AND SEAL, IN THE STATE AND COUNTY AFORESAID, THIS 5<sup>TH</sup> DAY OF SEPTEMBER 2002.

(NOTARY SEAL)



Anthony Bernard  
MY COMMISSION # CC878985 EXPIRES  
December 4, 2003  
BONDED THRU TROY PAUL INSURANCE, INC.

  
Notary Public, State of Florida at large.

MY COMMISSION EXPIRES: 12/04/03

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(305) 251-4591

**CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT****CERTIFICATE OF REGISTERED AGENT  
OF**HOWARD'S LAWN & MAINTENANCE SERVICE, INC.

(Name of corporation)

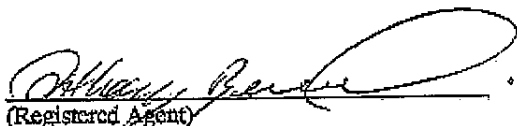
PURSUANT TO FLORIDA STATUTES SECTIONS 48.091 AND 607.034, THE FOLLOWING SUBMITTED: THE ABOVE CORPORATION, DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS REGISTERED OFFICE AS INDICATED IN THE ARTICLES OF INCORPORATION AT

9032 SW 152<sup>nd</sup> STREET  
MIAMI, FL. 33157

HAS NAMED ANTHONY BERNARD LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

**ACKNOWLEDGEMENT**

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATIN AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISION OF FLORIDA LAW IN KEEPING OPEN SAID OFFICE.

  
(Registered Agent)

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