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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Professional Cuts Lawn Service, Inc. SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$78.75 \$78.75 \$87.50 \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Professional Cuts Lawn Service (Dave Towsley) FROM: Name (Printed or typed) 12605 Early Run Lane Address Riverview, FL. 33569 City, State & Zip 813-215-9978

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

Daytime Telephone number

US DEC 18 WH 10: 02

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:

Professional Cuts Lawn Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

12605 Early Run Lane Riverview, FL. 33569

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Lawn Service

ARTICLE IV SHARES

The number of shares of stock is: 10

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:

Dave Towsley 12605 Early Run Lane Riverview, FL. 33569

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dave Towsley 12605 Early Run Lane Riverview, FL. 33569

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

Signature/Registered Agent

Date

/ Date

Signature/Incorporator