## D03000045898

| (Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: |   |  |  |  |  |
|--|---|--|--|--|--|
| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | (Requestor's Name)                      |  |  |  |  |
| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   |   |  |  |  |  |
| (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  | (Address)                               |  |  |  |  |
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| (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  | (Address)                               |  |  |  |  |
| (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | ,                                       |  |  |  |  |
| (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | (City/State/Zin/Phone #)                |  |  |  |  |
| (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | (21),0-13/2(), (10)(0.1)                |  |  |  |  |
| (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | PICK-UP WAIT MAIL                       |  |  |  |  |
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| (Document Number)  Certified Copies Certificates of Status   | (Dunings Entity Name)                   |  |  |  |  |
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| Certified Copies Certificates of Status  |   |  |  |  |  |
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| Special Instructions to Filing Officer:  | Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer:  |   |  |  |  |  |
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03 APR 21 PH 2: 35

Office Use Only

B444

## TRANSMITTAL LETTER

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

| SUBJECT: R                             | INO CANDSC. (PROPOSED CORPORA)             | APE SERVIC  | ES, M.   |  |
|--|--|---|--|--|
|  | (PROPOSED CORPORA'I                        |   |  |  |
| □ \$70.00<br>Filing Fee                | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy  ADDITIONAL COR | \$87.50 Filing Fee, Certified Copy & Certificate of Status |  |
| FROM:                                  | DAWN M. Name (Pr                           | JAPHET inted or typed)                              |  |  |
| 2603 ALENA PL.                         |  |   |  |  |
| LAKE MARY FL. 32746  Oity, State & Zip |  |   |  |  |

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

| <b>A</b>   |                      |
|--|----------------------|
| ARTICLES OF INCORPORATION  | FILED                |
| In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)   | US ADD               |
|  | 03 APR 21 PM 2: 35   |
| ARTICLE I NAME   | SECRE 2.35           |
| The name of the corporation shall be:  | TALLAH SSEE. FLORIDA |
| The name of the corporation shall be:  RHINO LANDSCAPE SERVICES,   | INC.                 |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:  |                      |
| 715 N. ELDER RD. SANFORD, FL. 327  | 71                   |
| ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  |                      |
| the state of the s |                      |
| any lawful business endewur  |                      |
|  |                      |
| ARTICLETV SHARES The number of shares of stock is:   | ·                    |
|  |                      |
| /60 <b>6</b>   |                      |
| ARTICLE V INITIAL OFFICERS (DIRECTORS (optional)   |                      |
| The name(s), address(es) and title(s):   |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
|  |                      |
| ARTICLE VI REGISTERED AGENT  | , ,                  |
| The <u>name and Florida street address</u> of the registered agent is:   |                      |
| Dawn M. Japher ROBERT A. JAPHET  | •                    |
| TITLE OF TIS N. FINTERN  |                      |
| Sanford, PL 2277 SANFORD, FL. 3  | 32771                |
| ARTICLE VII INCORPORATOR   |                      |
| The name and address of the Incorporator is:   |                      |
| Davon M. Japhet  | •                    |
| 715 N. Elder Rd  |                      |
| Sarfa-d, rc 32771<br>***********************************   |                      |
|  |                      |
| Having been named as registered agent to accept service of process for the above stated corporate certificate, I am familiar with and accept the appointment as registered agent and agree to act in the second seco |                      |
|  |                      |
| 1 Kl XI K  | 11-19-02             |
| Signature/Registered Agent Da  | ite                  |
|  | 1 1                  |
| from M. Moster   | 11/19/02             |
| Signature/Incorporator D   | ate                  |
|  |                      |