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(Requestor's Name)				
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TRANSMITTAL LETTER

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

Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	i a check for:	
\$70.00 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 PPY REQUIRED	
FROM: James Kontroubis Name (Printed or typed)				
373 Dolphin Ove. 5E				
	St. Petersburg	, PC - 33 70 State & Zip	55	
	727.381-C	OFO elephone number		

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

ARTICLES OF INCORPORATION	03 . FILFO
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	APP 30
ARTICLE I NAME	TALLAHAREE FLORIDA
The name of the corporation shall be:	59
•	S. FI ATA
James Kontroubis Landscaping and T	ree, Inc
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
373 Dolphin Ave S.E.	
St. Petersburg FC 33705	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	•
Any Lawful purpose	
ARTICLE IV SHARES	
The number of shares of stock is: 100	
, 5 -	
The name(s), address(es) and title(s):	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
James Kontroubis	
373 Dolphin Ave S.E. St. Petersburg FC 33705 ARTICLE VII INCORPORATOR	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
James Kontroubis	
373 Dophin Ave. SE. St. Petersburg, FL.	

Having been named, as registered agent to accept service of process for the above stated corporatificate, I am figurate with and accept the appointment as registered agent and agree to act	in this capacity
	11/20 /2
//w /h///>	7108107
Signature/Registered Agent	Date
	4/28/03
Signature/Incorporator	<u>// 40/ 0</u> Date
// digitation mediporator	Dail