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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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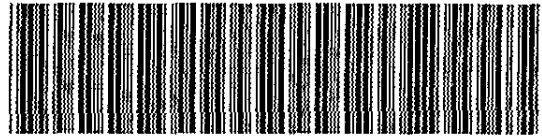
(Business Entity Name)

(Document Number)

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2003 MAY 23 PM 6:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

✓
6/2/03

TRANSMITTAL LETTER

FILED

2003 MAY 23 PM 6:58

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Magic Touch Lawn Services Co.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: James Calcajano
Name (Printed or typed)

4450 SW 61 Av # 6.
Address

DAVIE, FL 33314.
City, State & Zip

954 325 1404
Daytime Telephone number

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

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:

MAGIC TOUCH LAWN SERVICES CO.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4450 SW 61 Ave # 6.
DAVIE, FL 33314.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

profit. Lawn Service.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAMES E CALCAGNO President. 4450 SW 61 Ave # 6 DAVIE FL 33314.
JAMES N BRANDT Vice President 4450 SW 61 Ave # 6 DAVIE FL 33314.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

PATRICIA A KELLER. 4450 SW 61 Ave # 6 DAVIE, FL 33314.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES CALCAGNO
4450 SW 61 Ave # 6
DAVIE FL 33314

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

Patricia A Keller
Signature/Registered Agent

5/20/03
Date

James E Calcagno
Signature/Incorporator

5/20/03
Date

FILED
2003 MAY 23 PM 6:58
CLERK OF STATE
TALLAHASSEE FLORIDA