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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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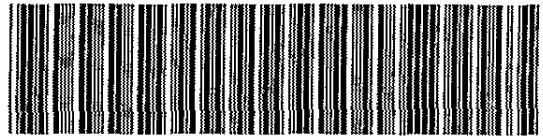
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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03 JUN -2 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6-6-03
[Signature]

TRANSMITTAL LETTER

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

SUBJECT: LawnCambers, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Mindy Krystof
Name (Printed or typed)

6410 NW Zee Court
Address

Port St. Lucie, FL 34986
City, State & Zip

772-878-5352
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Lawncombers, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6410 NW Zee Court
Port St. Lucie, Fl 34986

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact and engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1. The maximum number of shares (unless amended by the board of directors) of authorized capital stock in this Corporation shall be ONE THOUSAND shares of common stock with a nominal or par value of \$1.00 per share
2. The capital stock may be paid for in property, labor, services or cash at a just valuation to be fixed by the Board of Directors. All of such stock shall be fully paid and non-assessable.

ARTICLE V INITIAL OFFICERS/DIRECTORS

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

PRESIDENT - Mindy Krystof - 6410 NW Zee Ct. Port St. Lucie, FL 34986
VICE PRESIDENT Richard Krystof - 6410 NW Zee Ct. Port St. Lucie, FL 34986

ARTICLE VI REGISTERED AGENT

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

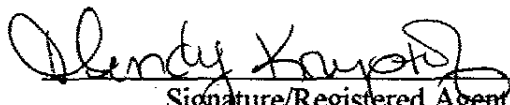
Mindy Krystof
6410 NW Zee Ct.
Port St. Lucie, FL 34986

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Mindy Krystof
6410 NW Zee Ct.
Port St. Lucie, FL 34986

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
MINDY KRYSTOF

5.31.03
Date



Signature/Incorporator
MINDY KRYSTOF

5.31.03
Date