

P 03000080544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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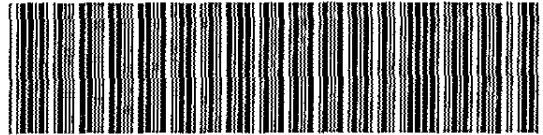
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

67-23-5  
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## TRANSMITTAL LETTER

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

SUBJECT: A-1 Professional Tree Service 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: Elmer N. Thomas  
Name (Printed or typed)

P.O. Box 647  
Address

Lake Alfred, FL 33850  
City, State & Zip

(863) 287-7194  
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:

A-1 Professional Tree Service Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 647 Lake Alfred, FL 33850

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Tree Trimming, Removal

## ARTICLE IV SHARES

The number of shares of stock is:

800

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Elmer N. Thomas - President P.O. Box 647 Lake Alfred FL 33850  
7311 SR 557 Polk City FL 33868

Elmer T. Thomas - Vice President - P.O. Box 1261 - Lake Alfred FL 33850  
7311 SR 557 Polk City FL 33868

Raymona S. Thomas - Secretary/Treasurer  
P.O. Box 647 Lake Alfred FL 33850  
7311 SR 557 Polk City FL 33868

## ARTICLE VI REGISTERED AGENT

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

Elmer N. Thomas  
7311 SR 557 Polk City, FL 33850

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

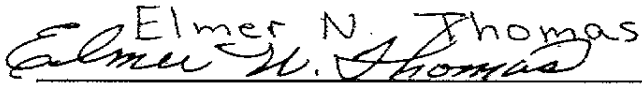
Elmer N. Thomas  
7311 SR 557 Polk City FL 33850

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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

7/15/03  
Date

Elmer N. Thomas  
  
Signature/Incorporator

7/15/03  
Date

Elmer N. Thomas

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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