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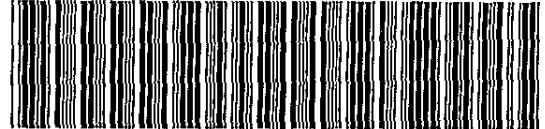
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: __NORTHERN TREES OF CENTRAL FLORIDA INC.__

Enclosed is our original and one (1) copy of the Articles of Incorporation and our check
for __\$ 78.75__.

FROM: __Isabel E. Cornago__

__245 La Paz Drive__

__Kissimmee, Fl. 34743__

__(407) 344-0335__

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TALLAHASSEE, FL

ARTICLES OF INCORPORATION OF

__ NORTHERN TREES OF CENTRAL FLORIDA INC. __

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

" NORTHERN TREES OF CENTRAL FLORIDA INC. "

ARTICLE II PRINCIPLE OFFICES

245 La Paz Drive.
Kissimmee, Fl. 34743

ARTICLE III DURATION

The period of its duration is perpetual.

ARTICLE IV PURPOSE

The purpose of this corporation is to engage in activities or business permitted under the laws of the United States of America and the State of Florida. The purpose of the corporation shall not be limited, and nothing therein shall be deemed as prohibiting the corporation from extending its activities to any related or otherwise permissible lawful business purpose which may become necessary, profitable or desirable for the furtherance of the corporation objectives. The initial purpose shall be to provide delivery services and tree sales.

ARTICLE V SHARES OF COMMON STOCK

The corporation is authorized to issue one hundred (100) shares of stock at no par value.

ARTICLE VI INITIAL REGISTERED AGENT & ADDRESS

Isabel E. Cornago
245 La Paz Drive.
Kissimmee, Fl. 34743

ARTICLE VII MANNER OF ELECTION OF OFFICERS & DIRECTORS

Election shall be by plurality of the votes cast by the shares entitled to vote in the election at a meeting at which a quorum is present.

OFFICERS Pres. Isabel E. Cornago, 245 La Paz Drive, Kissimmee, Fl. 34743

Sec. James E. Pittsley, 245 La Paz Drive, Kissimmee, Fl. 34743

ARTICLE VIII INCORPORATORS

Isabel E. Cornago SS# 057-66-5406

James E. Pittsley SS# 090-40-5863

ARTICLE IX AMENDMENT OF ARTICLES

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE X INDEMNIFICATION

This corporation may be empowered to indemnify any officer or director or any former officer or director in the manner set out and provided for in the laws of this corporation and pursuant to Section 607.014, Florida Statutes, as amended.

IN WITNESS WHEREOF, the undersigned Incorporator(s) has executed these Articles of Incorporation this 15 day of Sept., 2003.

Isabel E. Cornago
Isabel E. Cornago

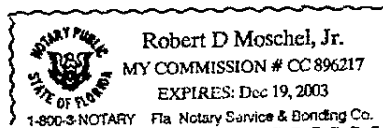
James E. Pittsley
James E. Pittsley

STATE OF FLORIDA
COUNTY OF Osceola

The foregoing instrument was acknowledged before me this 15 day of Sept, 2003 by Isabel E. Cornago & James E. Cornago, who is (x) personally known to me, or () who produced _____ as identification and who acknowledged before me that he/they executed this instrument.

Robert D Moschel, Jr.
Notary Public State of Florida

SEAL



**CERTIFICATE OF DESIGNATION
REGISTERED AGENT & OFFICE**

Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the Registered Agent and Office, in the State of Florida.

1. The name of the corporation is: NORTHERN TREES OF CENTRAL FLORIDA INC.

2. The name and address of the Registered Agent and Office is:

 Isabel E. Cornago

 245 La Paz Drive

 Kissimmee, Fl. 34743

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE OF DESIGNATION IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

 Isabel E. Cornago
Signature

 9/15/03
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 SEP 18 PM 1:27

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