P03000107901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Allen Lawn Care Inc.,
(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: Deborah Allen
Name (Printed or Typed)

442 N. Wabash Ave.
Address

Lakeland, FL 33815
City, State Zip

863-802-4678
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME
The name of the corporation shall be:

Allen Lawn Care Inc.,

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address if this corporation shall be:

442 N. Wabash Ave.
Lakeland, FL 33815

ARTICLE III SHARES
The number of share that this corporation is authorized to have outstanding at any one time shall be:

5000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:

Melody M. Dennis
442 N. Wabash Ave.
Lakeland, FL 33815

ARTICLE V INCORPORATOR
The **name and address** of the incorporator to these Articles of Incorporation are:

Deborah Allen
950 Keen Ct.
Lakeland, FL 33815

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TALLAHASSEE, FLORIDA

Deborah J. Allen
Signature/Incorporator

9-19-03
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of proceed for the above stated corporation at the place designated 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 statues 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.

Melodyn M. Dennis
Signature/Registered Agent

9-22-2003
Date