P03000117306

(Re	equestor's Name)	
(Ad	idress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
		<u> </u>

Office Use Only



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03 DCT 21 AM 1: 45
SENTANDA FLORIDA

CB 10-21

TRANSMITTAL LETTER

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

SUBJECT: Enterprise Property Management 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 □ \$78.75

Filing Fee Filing Fee & Filing Fee, & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:

Clive G. Christie Sr.

Name (Printed or typed)

100 Dove Cir

Address

Royal palm Beach, Fl_33411

City, State & Zip

561 784-1821 Fax 561 784-1924

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 7, 2003

CLIVE G. CHRISTIE SR. 100 DOVE CIR ROYAL PALM BCH, FL 33411

SUBJECT: ENTERPRISE PROPERTY MANAGEMENT AND LAWN CARE INC.

Ref. Number: W03000028877

We have received your document for ENTERPRISE PROPERTY MANAGEMENT AND LAWN CARE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the number of shares only in block IV, not who owns them,,

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document; please call (850) 245-6925.

Cynthia Blalock Document Specialist New Filings Section

Letter Number: 403A00054874

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•	
ARTICLES OF INCORPORATION	·
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
	FILED
ARTICLE I NAME	!
The name of the corporation shall be:	03 OCT 21 AM 1: 45
contribute mogesty hanagement and factor care Inc.	SECRETATE OF STATE TALLAHASSEE, FLORIDA
Enterprise Property Management and factor Care Inc. 100 Dove Cir. hough Palm Beach, FL. 33411 ARTICLE II PRINCIPAL OFFICE	I ALLMINOSEE, FLOKIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
P.O. Box 17933	
W.P.B FL. 33416	
ARTICLE III PURPOSE	
The number for which the compretion is organized is:	,
To Management Properties Reps. Sprinker systems, Land scar	ing Custing of Image
To Management Properties heps. Sprinker systems, Land scape incorring of flower gardens, trimming edges, planting of sed; of ARTICLE IV SHARES	Him clarate lads
ARTICLE IV SHARES	ering of emply 1075
The number of shares of stock is: 3000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
Cline G. Christie Sr. President 1581 Windorah Way Royal	Palm Beach FL. 33 HII
Marcia Lewis Vice President Sechetary Treasurer 53407 plans	ash ed word talm Brackers
Marlon Christie Diffector 1581 Windorah way Royal Ru	m Beach FL . 33411
Marcia Lewis Vice President Sechetary Treasurer 5340 C Elmhold Moral Christic Director 1581 Windorsh way Royal Rose Chive Gr. Christic JR. Director 1581 Windorsh way Royal Rose Dorrector Christic JR. Director 1581 Windorsh way Royal Particle VI REGISTERED AGENT	Im Beach, FL 33 Hell
	! Duan, Fr 33 ALL
The <u>name and Florida street address</u> of the registered agent is:	,
Ruthlyn Kobinson 5242 Whad north	: :
Bonita Pines West Palm Beach, FL. 33415	5
ARTICLE VII INCORPORATOR	
	0 (00 / 1
The name and address of the Incorporator is: Clive G. Christie SR. 1581 Windowsh Way Royal Palm I Services P.O. Box 17933 W.P.B FL 33.416	seach, 33411
Services P.O. BOX 17933 W.P.B FL 33.HIL	•
**************************************	*******
Having been named as registered agent to accept service of process for the above stated corporations and accept and agree to get in the	on at the place designated in this
certificate, I am Jamiliar with and accept the appointment as registered agent and agree to act in the	is capacity
1 hathlyn hapinson	10.13.03
Signature/Registered Agent Dat	e
V Land \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	11.12 2
Signature/Incorporator Da	
Signature/Incorporator Da	
	!