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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

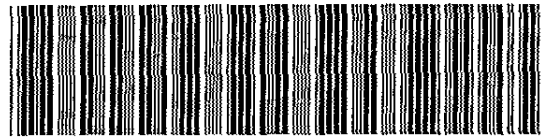
(Business Entity Name)

(Document Number)

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

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Office Use Only



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FILED  
03 OCT 17 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLA 323

10-21-03  
[Signature]

Law Offices of  
*Wm. Newt Hudson*

23 West Tarpon Ave.  
Tarpon Springs, FL 34689  
727/938-2004  
(Fax) 727/934-9960

October 15, 2003

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32304

RE: Williams Nursery, Inc.

Gentlemen:

Please find enclosed an original and one copy of Articles of Incorporation for the above-named corporation. In addition, please find enclosed a check in the amount of \$78.75 which represents the following fees:

Filing fee	\$ 35.00
Certificate of Status	\$ 8.75
Registered Agent fee	\$ 35.00
	=====
	\$ 78.75

Please file the original of the enclosed Articles of Incorporation and return the Certificate of Status to the undersigned.

Your prompt attention to this matter will be greatly appreciated. Please feel free to give me a call should you have any questions.

Yours truly,

  
Donna J. Mercer  
for: WM. NEWT HUDSON

/dm  
Enc.

ARTICLES OF INCORPORATION  
OF  
WILLIAMS NURSERY, INC.

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03 OCT 17 PM 3:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, the undersigned subscriber to these Articles of Incorporation, natural person, competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be WILLIAMS NURSERY, INC. Its initial principal place of business shall be 1419 Fox Run Drive, Tarpon Springs, Florida 34689, with its initial mailing address being the same.

ARTICLE II. NATURE OF BUSINESS

This corporation is organized for the purposes of transacting any and all lawful business as authorized under the laws of the State of Florida or any other state, country or territory under which it may qualify to do business; and more particularly, it shall have all the powers set forth in Florida Statutes Chapter 607 and any and all other powers incidental to the conducting of its business and any and all other similar or like services.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock, all of one class.

ARTICLE IV. REGISTERED AGENT

The corporation shall have as its initial registered agent, Rosemarie Williams, 1419 Fox Run Drive, Tarpon Springs, Florida 34689, who shall acknowledge acceptance of said position by Affidavit.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

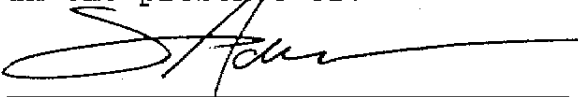
ARTICLE VI. INCORPORATOR

The subscriber of these Articles of Incorporation and post office addresse is as follows:

<u>NAME</u>	<u>ADDRESS</u>
Gary W. Williams	1419 Fox Run Drive Tarpon Springs, FL 34689

IN WITNESS WHEREOF, I, the undersigned have hereunto subscribed my hand and affixed my seal to these Articles of Incorporation this 15<sup>th</sup> day of October, 2003.

Signed, Sealed and Delivered  
in the presence of:



Witness/Wm. Newt Hudson



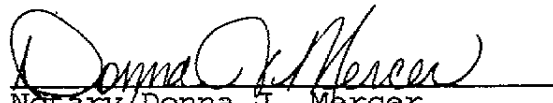
Gary W. Williams



Witness/Donna J. Mercer

STATE OF FLORIDA  
COUNTY OF PINELLAS

The foregoing Articles of Incorporation were acknowledged before me this 15<sup>th</sup> day of October, 2003, by Gary W. Williams, who [☒] is personally known to me; or who [☐] produced ( ) and ( ) as identification, respectively, and who (did/did not) take an oath.



Notary/Donna J. Mercer  
Commission No.:



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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED

In pursuance with Section 48.091, Florida Statutes, and  
Section 607.0501, Florida Statutes, the following is submitted, in  
compliance with said Act:

First -- WILLIAMS NURSERY, INC. desiring to organize under the  
laws of the State of Florida with its principal office, as  
indicated in the Articles of Incorporation at the City of Tarpon  
Springs, County of Pinellas, State of Florida, has named Rosemarie  
Williams, 1419 Fox Run Drive, Tarpon Springs, Florida 34689, as its  
agent to accept service of process within this State.

ACKNOWLEDGEMENT:

Having been named to accept service of process for the above  
stated corporation, at place designated in this certificate, I  
hereby accept to act in this capacity, and agree to comply with the  
provision of said Act relative to keeping open said office, and I  
hereby state that I am familiar with, and accept, the obligations  
of this position.

*Rosemarie Williams*  
Rosemarie Williams/Resident Agent

STATE OF FLORIDA  
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 15th  
day of October, 2003, by Rosemarie Williams, who [ ] is personally  
known to me; or who [ ☒ ] has produced ( FL. D.L. ) as  
identification and who (did/did not) take an oath.

*Donna J. Mercer*  
Notary/Donna J. Mercer  
Commission No.:

