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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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TRANSMITTAL LETTER

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

SUBJECT: TOM	HAZEL IRRIGATION, INC		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	□ \$78.75	\$78.75	☑ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
1 11116 1 00	& Certificate of Status	& Certified Copy	Certified Copy
		os commos copy	& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
FROM: TO	OM HAZEL IRRIGATION, I	NC	
FROM:		(Printed or typed)	
	170-B CYPRESS WAY E	AST	
•		Address	
	NAPLES, FL 34110		
•	City	, State & Zip	
	239-253-0704		
•	Daytime'	l'elephone number	

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

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE:

Tom Hazel Irrigation, Inc Document #P00000103219

Dear Division of Corporations:

Attached please find the Articles of Dissolution for the corporation Tom Hazel Irrigation, Inc. and the filing fee of \$35. I attest that I will not file the Articles of Revocation of Dissolution for the Florida profit corporation document #P00000103219

Mailing address:

Tom Hazel 170-B Cypress Way East Naples, FL 34110

Telephone Number:

Office:

239-253-0704

Thank you for your assistance in this matter.

Sincerely,

Linda Hazel

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: TOM HAZEL IRRIGATION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 170-B CYPRESS WAY EAST NAPLES, FL 34110

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: IRRIGATION REPAIR & INSTALLATION

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
THOMAS M. HAZEL 170-B CYPRESS WAY E NAPLES, FL 34110 PRESIDENT
Linda Hazel 170-B Cypress way E Naples, FL 34110 Sec

ARTICLE VI REGISTERED AGENT

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

LINDA HAZEL 170-B CYPRESS WAY E NAPLES, FL 34110

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LINDA HAZEL 170-B CYPRESS WAY E NAPLES, FL 34110

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

Date

10/15/03
Date

10/15/03
Date

O3 OCT 2) PM 3: 01