

PO 4000029204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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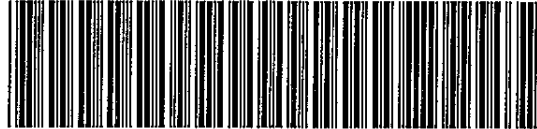
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB -5 PM 4:19

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TRANSMITTAL LETTER

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

SUBJECT: Best Plants and Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Patricia Miller
Name (Printed or typed)

1114 North 'L' St.
Address

Lake Worth, FL 33460
City, State & Zip

(561) 533-0532
Daytime Telephone number

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

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:

Best Plants and Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 1346, Lake Worth, FL 33460

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The buying and selling of indoor plants and the maintenance of indoor plants.

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):

ARTICLE VI REGISTERED AGENT

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

Patricia Miller
1114 North 'L' St.
Lake Worth, FL 33460

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia Miller
1114 North 'L' St.
Lake Worth, FL 33460

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

Patricia M. Miller

Signature/Registered Agent

2/1/04

Date

Patricia M. Miller

Signature/Incorporator

2/1/04

Date

FILED

04 FEB -5 PM 4:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA