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TRANSMITTAL LETTER

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

- 	IDA KEGIONAL IKEE SEKVI	E, INC.			
SUBJECT:	(PROPOSED CORPORA	TE NAME - MUST INCL	ndakinaarx)		
Enclosed are an ori	ginal 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,		
	& Certificate of Status	& Certified Copy	-		
		1	& Certificate of		
			Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	FLORIDA REGIONAL TR	EE SERVICE, INC.			
1102,4	Name (Printed or typed)				
	2037 Old New York				
		Address			
	DeLand, FL 32720				
	City	, State & Zip			
		-			
	386-740-1025				
		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 Florida Regional Tree Service, Inc. The name of the corporation shall be: PRINCIPAL OFFICE ARTICLE II 2037 Old New York The principal place of business/mailing address is: DeLand, FL 32720 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: Tree cutting service ARTICLE IV 100 shares of \$1.00 par value The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): President and Vice President: Mark Hoffman 2037 Old New York DeLand, FL 32720 Secretary/Treasurer: Marco Miler 2037 Old New York, DeLand, FL 32720 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Mark Hoffman 2037 Old New York DeLand, FL 32720 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Mark Hoffman 2037 Old New York DeLand, FL 32720

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

4/24/04

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Registered Agent

Signature/Incorporator