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TRANSMITTAL LETTER

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

	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>		
\$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	
FROM: M	ichael Aylin	(Printed or typed)		•
	P.O. Box 15285	(trinica or typea)		
e esta anno emig		Address		 = -7
	Tallahassee, FL 32317	, State & Zip		
	850-933-2686			
	Daytime 1	Telephone number		 78 · 536 712

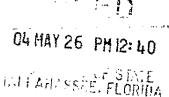
NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

C&M Landscaping and Lawn, Inc.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O. Box 15285

Tallahassee, FL 32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Landscaping and Lawn Maintenance

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Cynthia Aylin, President P.O. Box 15285

Tallahassee, FL 32317

Michael Aylin, Vice President, COO Same Address

ARTICLE VI REGISTERED AGENT

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

Michael Aylin

12000 TURKEY Roost RD

Tallahassee, FL 32317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Aylin P.O. Box 15285 Tallahassee, FL 32317

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

Date

Signature Incorporator