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PICK-UP WAIT MA	IL.
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(Document Number)	
Certified Copies Certificates of Status	<u>-</u>
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TRANSMITTAL LETTER

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

SUBJECT:	WES LOWN (PROPOSED CORPORA	are the.	UDE SUIRELX)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	William	E Sanders (Printed or typed)	·	
	18098 49H	Street Nor	<u>t</u> l	O4 JUL
	Loxahatchee City,	FL 3347	76	21 PH 3:
	Daytime To	44-4671		# 5 %

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: WES lawn Care, Inc. ARTICLE II PRINCIPAL OFFICE 18098 49th Street north Loxahatchee, Floride 33470 The principal place of business/mailing address is: ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: /wwn Service 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): William & Sanders President 1809 & Late Street North Lutchatcher, FL 33470 The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: William E Sandos 18099 HR SI, NOT Luxabether Ft 3 3470 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: William E Sanders 18098 49H 8feet Mel Lotalaticher, FL 33470 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

Signature/Incorporator