P04000132875

(Re	equestor's Name)	
·		
(Ad	dress)	
(Ad	dress)	
		10
(Cit	ty/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
	·	
(Bu	siness Entity Nar	ne)
Фс	ocument Number)	
(= -		
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





500040418985

08/26/04--01014--004 **87.50



1 305612 D na 0/22

TRANSMITTAL LETTER

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

SUBJECT: Integrat	ed Lawnscapes Inc.			_	,
	(PROPOSED CORPORA	IE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	rinal 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	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM: Phi	ilip Morton				
	Name ((Printed or typed)	-	٠	
	4902 Haiti Circle				
	A	Address		•	
9	Orlando, Fl 32808	State & Zip	<u>.</u> .		
ı	(407)928-1010	-			
•	Daytime To	elephone number			

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 27, 2004

PHILIP MORTON 4902 HAITI CIR ORLANDO, FL 32808

SUBJECT: INTEGRATED LAWNSCAPES INCORPORATED

Ref. Number: W04000032586

We have received your document for INTEGRATED LAWNSCAPES INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 204A00052404

Δ	RTI	CT	ES	OF	INC	OR	POR	A	TI	n	V
$\boldsymbol{\mathcal{L}}$	T/ L/T	V.L	1217	OI.	1111	~~!\	$\mathbf{x} \mathbf{v} \mathbf{n}$	$\overline{}$		v.	. 7

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

ARTICLE I NAME

The name of the corporation shall be:

Integrated Lawnscapes Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4902 Haiti Circle Orlando, Fl 32808

04 SEP 22 PN 2:19 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to provide the legal structure to give our customers quality lawn maintenance and landscaping services.

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Clay Williams, 4902 Haiti Circle Orlando FI, 32808 President/Director; Philip Morton, 4902 Haiti Circle Orlando FI, 32808 Vice President/Director.

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Philip Morton; 4902 Haiti Circle Orlando, FI 32808

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Philip Morton; 4902 Haiti Circle Orlando, Ft 32808

Signature/Registered Agent Date

Signature/Incorporator Bate