P04000138197

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



000041564930

10/05/04--01069--012 **87.50

04 OCT -5 AM 8: 37 SECRETARY OF STATE FAIL ANASSEE, FLORIDA

Dan 10-6-04

TRANSMITTAL LETTER

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

| SUBJECT: | | ANDSCAPING RATE NAME - MUST INCLU | 4 TREES INC | |
|---|--|--|-------------------------------------|--|
| Enclosed are an original \$70.00 Filing Fee | ginal and one (1) copy of the a \$78.75 Filing Fee & Certificate of Status | articles of incorporation and a \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy | |
| | | ADDITIONAL COR | & Certificate of Status PY REQUIRED | |
| FROM: COMPLETE LANDSCAPING & TREES LNC Name (Printed or typed) 3/60 NE 3 AVE | | | | |
| | | Address | 33334 | |

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

954-817-5646

Daytime Telephone number

| ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | FILED |
|---|---|
| | 04 OCT -5 AM 8: 37 |
| ARTICLE I NAME The name of the corporation shall be: | |
| The name of the corporation shall be: COMPLETE LANDSCAPING + TREES | ZIAL AHASSEE, FLORIDA |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3/60 NE 3 AVE OAKLAND PARK FL 333399 | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | · |
| 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): | |
| CARLTON BROWN, PRES. | |
| CARLTON BROWN, PRES. 2021 NW 29 AVE | |
| FL. LAVDERDALE FL 33311 | |
| ARTICLE VI REGISTERED AGENT | cont in |
| The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered a | gent is. |
| CARLTON BROWN | |
| AND AND PARK STREET | |
| 3160 NE 3 AVE OAKLAND PARK FL 33334 ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: | |
| CARLTON BROWN | |
| 2021 NW 29 FVE FORT LAUSERDALE FL 3331 | 1 |
| <i>፟</i> ቖ፟፟፠ጙ፟፟፟፟፟፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠፟፠ | ***** |
| Having been named as registered agent to accept service of process for the above stated corporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in this | n at the place designated in this capacity |
| Signature/Registered Agent | 10-4-2004 Date |
| & Carlton L. Brun | 10-4-2004 |
| Signature/Incorporator | Date |