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## TRANSMITTAL LETTER

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

SUBJECT: RAYNOR SHINE IRRIGATION AND LAWN SERVICES INC.

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REOUIRED

FROM: Ron Raynor Name (Printed or typed)	<del></del>
Name (Finited of typed)	
33 DOGWOOD DR. Address	
Address	
CRAW FORDVILLE FL. City, State & Zip	32 327
City, State & Zip	
850-926-7345	
Daytime 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 The name of the corporation shall be:  RAYNOR SHINE IRRIGATION AND LAWN SERVICES INC.	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  33 DOG WOOD DRIVE  CRAWFORDUILLE FL. 32327  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  INSTAIL SPRINKLER SYSTEMS AND GENERAL LAWN MAINTENANCE	ı
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):  RON RAYNOR - PRESIDENT  33 ROG WOOD DRIVE  CRAWFORDVILLE FL. 32327	
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  RON RAYNOR  33 DOG WOOD DRIVE  CRAWFORDUILLE FL. 32329  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	
RON RAYNOR 33 DOGWOOD DRIVE CRAWFORDVILLE FL 32329 **********************************	:
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. Lam familiar with and accept the appointment as registered agent and agree to act in this capacity  Signature/Registered Agent  Signature/Incorporator  Date	