

P05000060334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

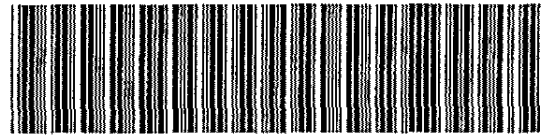
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 APR 21 PM 3:48

TRANSMITTAL LETTER

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

SUBJECT: Star Cut Lawn Service, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$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

ADDITIONAL COPY REQUIRED

FROM: TOMMIE L. CAPERS

Name (Printed or typed)

7725 70TH AVE N

Address

PINELLAS PARK, FL 33781

City, State & Zip

727 545-8935

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)

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ARTICLE I NAME

The name of the corporation shall be:

STAR CUT LAWN SVC, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

7725 70TH AVE N
PINELLAS PARK, FL 33781

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
to conduct business as a lawn service provider.

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):

Tommie L. Capers, President
7725 70th Ave N
Pinellas Park, FL 33781
Diane Capers, Vice President/Secretary/Treasurer
7725 70th Ave N
Pinellas Park, FL 33781

ARTICLE VI REGISTERED AGENT

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

Diane Capers
7725 70th Ave N
Pinellas Park, FL 33781

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tommie L. Capers
7725 70th Ave N
Pinellas Park, FL 33781

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

Diane Capers
Signature/Registered Agent

4/16/05
Date

Tommie L. Capers
Signature/Incorporator

4/16/05
Date