

P05000078365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

SUBJECT: L J 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: Leveque Joseph  
Name (Printed or typed)

10711 NW 21 Street  
Address

Coral Springs, FL 33071  
City, State & Zip

754-235-6911  
Daytime Telephone number

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

APPROVED  
AND  
FILED

05 MAY 31 PM 3:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

L J Lawn Service, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10711 NW 21 Street  
Coral Springs, FL 33071

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For any and all lawful business purpose

### ARTICLE IV SHARES

The number of shares of stock is:

1,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Leveque Joseph - President  
10711 NW 21 Street  
Coral Springs, FL 33071

### ARTICLE VI REGISTERED AGENT

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

Leveque Joseph  
10711 NW 21 Street  
Coral Springs, FL 33071

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Leveque Joseph  
10711 NW 21 Street  
Coral Springs, FL 33071

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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

x Leveque Joseph  
Signature/Registered Agent

5/26/05

Date

x Leveque Joseph  
Signature/Incorporator

5/26/05

Date