

P05000184498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

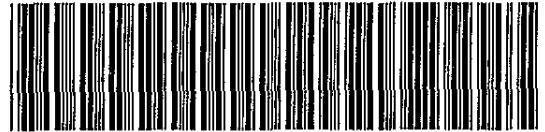
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers OCT 03 2005

W05-37858

## TRANSMITTAL LETTER

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

**SUBJECT:** Creative Exterior Dreamscapes, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** Marsha Lynn Antoniak

Name (Printed or typed)

PO Box 2116

Address

Windermere, FL, 34786

City, State & Zip

407-293-2283

Daytime Telephone number

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

Creative Exterior Dreamscapes, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO Box 1741  
Windermere, FL, 34786

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Landscaping

### ARTICLE IV SHARES

The number of shares of stock is:

1000 shares common stock @\$1.00 each

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Marsh Lynn Antoniak, PPD  
PO Box 1116, Windermere, FL, 34786

### ARTICLE VI REGISTERED AGENT

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

Marsha Lynn Antoniak  
2204 Hempel, Gotha, FL, 34787

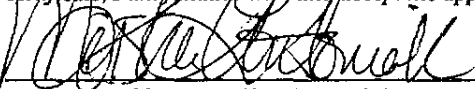
### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jason Venning  
1 South Orange Ave, Ste 304, Orlando, FL, 32801

\*\*\*\*\*

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



Signature/Registered Agent

4/5/05  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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allb

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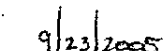
\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I do hereby will and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

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