

P05000144751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

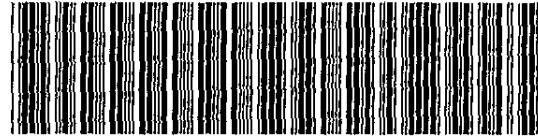
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 OCT 25 AM 10:47

D. Brown OCT 26 2005

## COVER LETTER

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

SUBJECT: LSM COMMERCIAL LAWN AND TREE  
(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: GREGORY S. MORTON  
Name (Printed or typed)

315 PAINT ST. #79  
Address

ROCKLEDGE, FL 32955  
City, State & Zip

321-302-2024  
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:

LSM COMMERCIAL LAWN AND TREE INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5606 INDIAN CROSSING DR.  
ROCKLEDGE, FL 32955

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

LAWN CARE

**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):

GREGORY S. MORTON

**ARTICLE VI REGISTERED AGENT**

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

GREGORY S. MORTON 315 PAINT ST. #79 ROCKLEDGE, FL 32955

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

GREGORY S. MORTON 315 PAINT ST. #79 ROCKLEDGE, FL 32955

\*\*\*\*\*  
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

10.14.05  
\_\_\_\_\_  
Date

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

10.14.05  
\_\_\_\_\_  
Date

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