

P050001105382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

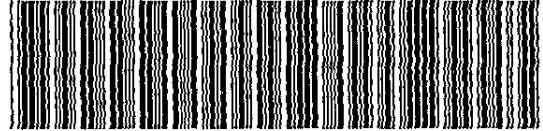
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2005 DEC 21 AM 9:11
TALLAHASSEE, FLORIDA

12/22/05

COVER LETTER

2005 DEC 21 AM 9:11

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

DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

SUBJECT: John's Complete Lawn Care, 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: John R. Nothe
Name (Printed or typed)

629 Goodwin Ave.
Address

New Smyrna Beach, FL 32169
City, State & Zip

413-668-5253
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:

John's Complete Lawn Care, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

629 Goodwin Ave.
New Smyrna Beach
FL. 32169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LAWN CARE Business
Landscaping
Light Construction

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John R. Nothe
629 Goodwin Ave.
New Smyrna Beach,
FL. 32169
President - CEO

ARTICLE VI REGISTERED AGENT

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

John R. Nothe
629 Goodwin Ave
New Smyrna Beach, FL. 32169

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John R. Nothe
629 Goodwin Ave
New Smyrna Beach, FL. 32169

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

John R. Nothe
Signature/Registered Agent
John R. Nothe
Signature/Incorporator

12/19/05
Date
12/19/05
Date

FILED
2005 DEC 21 AM 9:11
TALLAHASSEE FLORIDA