P05000168260

(Re	questor's Name)	
(Ad	dress)	1992.00
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to I	Filing Officer:	
	Office Use Only	4



100062410521

12/23/05--01015--011 **70.00



October 12, 2005

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

Re: <u>Earth Care Lawn Services</u> , Inc.
Gentlemen:
Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$70.00.
This represents the cost of the Filing Fees and Fee for Registered Agent Designation for the above named corporation.
Very truly yours.
(Individual's Name)
Earth Care Lawn Services, Inc. (Name of Corporation)
MAILING ADDRESS OF CORPORATION
986 Waterford Pointe Dr.
Port Orange, FL 32127

(386) 451-4031 Area Code Number

PHONE

Ext.

ARTICLES OF INCORPORATION

of

,		<u>-</u>				
	Earth Care	e Lawn Services, l	Inc.			
		corporation)				
The undersigned acting as the adopt(s) the following articles			orida Busine	ss Corpo	ration	Act,
	ARTICLE I - C	ORPORATE NAME	•	un ž		
The name of the corporation	is:				20	
	Earth Care	Lawn Services, Inc.		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2)EC	1
This corporation shall exist p		I – DURATION Ived according to Flo	orida law.	SSEE, FLOR	DEC:29 AH 10: 3:	
ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.						
The corporation is authorize		CAPITAL STOCK s of common stock, p	par value \$	1.00	_per s	hare.
The street address of the init	ARTICLE V - INITI			3:		
STREET ADDRESS						
986 Waterford	Pointe Dr.	·				
CITY Port Orange		FLORIDA		ZIP 32	2127	
Mailing address, if different						
STREET ADDRESS Sa	ame as above					
<u></u>			·	·		

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

CITY

ZIP

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Brady Froman		
ADDRESS	986 Waterford Pointe Dr.		<u>.</u>
CITY	Port Orange	FLORIDA	ZIP 32127

ARTICLE VII - INITIAL BOARD OF DIRECTORS

NAME	Brady Froman		
ADDRESS	986 Waterford Pointe Dr.		
CITY	Port Orange	STATE FL	ZIP 32127
NAME		_ ,	
ADDRESS			
CITY		STATE	ZIP
NAME			- -
ADDRESS			
CITY		STATE	- ZIP
NAME			
The names	Brady Froman		
	Brady Froman		
NAME ADDRESS CITY	Brady Froman		
NAME ADDRESS CITY NAME	Brady Froman 986 Waterford Pointe Dr.		ZIP <u>321</u> 27
NAME ADDRESS CITY NAME ADDRESS	Brady Froman 986 Waterford Pointe Dr.	STATE FL	ZIP <u>32127</u>
NAME ADDRESS CITY NAME ADDRESS CITY	Brady Froman 986 Waterford Pointe Dr.	STATE FL	ZIP <u>321</u> 27
NAME ADDRESS CITY NAME ADDRESS CITY NAME	Brady Froman 986 Waterford Pointe Dr.	STATE FL	ZIP <u>32127</u>
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS	Brady Froman 986 Waterford Pointe Dr.	STATE FL	ZIP 32127 ZIP
NAME ADDRESS CITY NAME ADDRESS CITY NAME	Brady Froman 986 Waterford Pointe Dr.	STATE FL	ZIP <u>32127</u>
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	Brady Froman 986 Waterford Pointe Dr.	STATE FL STATE STATE	ZIP 32127
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The unders	Brady Froman 986 Waterford Pointe Dr. Port Orange igned incorporator(s) have execute	STATE FL STATE STATE	ZIP 32127
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The unders	Brady Froman 986 Waterford Pointe Dr. Port Orange	STATE FL STATE STATE	ZIP 32127 ZIP 2IP 12th
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The unders	Brady Froman 986 Waterford Pointe Dr. Port Orange igned incorporator(s) have execute	STATE FL STATE STATE	ZIP 32127

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

	Earth Care Lawn Service	ces, Inc.
	orida Statutes Sections 48.091 and 607.0501, the oration, organized under the laws of the State	_
-	the Articles of Incorporation	01.7.001 .00 .000.000.000
	986 Waterford Pointe Dr.	
at	980 Waterford Forme Dr.	
	Port Orange, FL 32127	
has named	Brady Froman	<u> </u>
	aforesaid address, as its registered agent to acco	ept service of process within this
state.		
Having been n	amed as registered agent and to accept service	of process for the above stated
corporation at	the place designated in this certificate, I hereby	y accept the appointment as
registered agen	nt and agree to act in this capacity. I further ag	ree to comply with the propisions of
all statutes rela	tting to the proper and complete performance of	of my duties, and I am familiar with
and accept the	obligations of my position as registered agent.	29 —
		TG ≩ ITT
		33 ATE RIDA
<u> </u>	(Signature)	October 12, 2005