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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

COOPER'S NURSERY & LANDSCAPE, INC.

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06 APR 28 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
COPPER'S NURSERY & LANDSCAPE, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: COPPER'S NURSERY & LANDSCAPE, INC.
The principal place of business of this corporation shall be: 3230 S W 99TH AVENUE
MIAMI, FLORIDA 33165

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 500 SHARES AT \$1.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

1. MANUEL FONTAN
3230 SW 99TH AVENUE
MIAMI, FL 33165

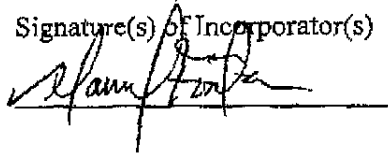
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) or the incorporator(s) to this articles of incorporation is(are):

MANUEL FONTAN
3230 SW 99TH AVENUE
MIAMI, FL 33165

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 28 day of APRIL, 2006.

Signature(s) of Incorporator(s)

A handwritten signature in black ink, appearing to read "Manuel Fontan", is written over a horizontal line. Below this line is another horizontal line.

ARTICLES OF INCORPORATION FILING FEE:

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

FILED
06 APR 28 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.325, Florida Statute, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

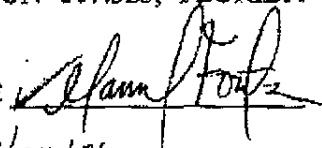
1. The name of the corporation is: COPPER'S NURSERY & LANDSCAPE, INC.

2. The name and address of the registered agent and office is:

MANUEL FONTAN
(P.O.BOX NOT ACCEPTABLE)
3230 SW 99TH AVENUE
(CITY/STATE/ZIP CODE)
MIAMI, FLORIDA 33165

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE



DATE

4/28/06