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## TRANSMITTAL LETTER

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

SUBJECT:	ANTOUNE LANDSCAPING SERVICES, INC.			
<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>ude suffix</u> )	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:	
□ \$70.00 Filing Fee	▼ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87,50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:		REGISTERED AGE	NT	- * 1 ·
-		OSIDE DR SUITE 1	v - va	r grot grant
-		NGS, FL. 33065 State & Zip	<u> 1908-yan</u> gara	general de la companya de la company
-	, , ,	368-3265		

NOTE: Please provide the original and one copy of the articles.

# **Articles of Incorporation**

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

#### **FIRST**

The name of the corporation is: ANTOUNE LANDSCAPING SERVICES, INC.

#### **SECOND**

The period of its duration is Indefinite.

#### **THIRD**

The purpose of the corporation is: Landscaping

#### **FOURTH**

The aggregate number of authorized shares is 200 shares Par-Value \$5.00

#### FIFTH

The corporation will not commence business until at least One Thousand (\$1,000.) Dollars have been received by it as consideration for the issuance of Shares.

#### SIXTH

Cumulative Voting of shares of stock are authorized.

#### **SEVENTH**

Provisions Limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: Approved by both the Stockholders and Board of Directors.

#### **EIGHT**

Provisions for regulating the internal affairs of the corporation are The Managing Partners (Corporate Officers) will be responsible for all day to day operation.

Articles of Incorporation

#### **NINTH**

The address of the initial Registered Office of the corporation is: 4119 Woodside Dr. Suite 1 Coral Springs, Florida 33065 and the name of it's initial Registered Agent at such address is: Antoine Elifaite

#### TENTH

Address of the principal place of business is: 4119 Woodside Dr. Suite 1 Coral Springs, Florida 33065

### **ELEVENTH**

The number of directors constituting the initial board of directors of the corporation is ONE, and the names and address of the persons who are to serve as directors until the first annual meeting of the Shareholders or until their successors are elected and shall qualify are:

NAME

\* Antoine Elifaite 4119 Woodside Dr. Suite 1 Coral Springs, Florida 33065

#### TWELFTH

The name and address of each incorporator is:

\* Antoine Elifaite 4119 Woodside Dr. Suite 1 Coral Springs, Florida 33065

Date: August 28, 2006

Antoine Elifaite, Incorporator

Having been named as Registered Agent and to accept services of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and Agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, my position as Registered Agent.

Antoine Elifaite, Registered Agent