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| (Requestor's Name)                      |  |  |  |  |
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| ( laulisse)                             |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
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| Cartified Conics Cartificates of Status |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |
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## **COVER LETTER**

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

| SUBJECT:   | LTS LAWN SERVICE, IN (PROPOSED CORPORA | IC                         |                  |  |
|--|--|----------------------------|------------------|--|
|  | (PROPOSED CORPORA                      | TE NAME – <u>MUST INCL</u> | UDE SUFFIX)      |  |
|  |  |                            |                  |  |
|  |  |                            |                  |  |
| Enclosed are an orig                               | ginal and one (1) copy of the arti     | cles of incorporation and  | d a check for:   |  |
| [ ] # <b>7</b> 0.00                                | [V] 0.70 75                            |                            |                  |  |
| \$70.00  | X \$78.75                              | XX \$78.75                 | \$87.50          |  |
| Filing Fee   | Filing Fee                             | Filing Fee                 | Filing Fee,      |  |
|  | & Certificate of Status                | & Certified Copy           |                  |  |
|  |  |                            | & Certificate of |  |
|  |  |                            | Status           |  |
|  | ADDITIONAL COPY REQUIRE                |                            |                  |  |
|  |  |                            |                  |  |
|  |  |                            |                  |  |
|  |  |                            |                  |  |
| FROM:  | BERNARD KOPET. P.                      | Α.                         |                  |  |
| FROM: BERNARD KOPET, P.A.  Name (Printed or typed) |  |                            |                  |  |
|  |  |                            |                  |  |
|  | 20170 DINES BLUD                       | CIITME #202                |                  |  |
|  | 20170 PINES BLVD.                      | Address                    |                  |  |
|  |  |                            |                  |  |
|  |  |                            |                  |  |
|  | PEMBROKE PINES, F                      | L 33029                    |                  |  |
|  | City,                                  | State & Zip                |                  |  |
|  |  |                            |                  |  |
|  | (954) 441-0403                         |                            |                  |  |
| 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:

LTS LAWN SERVICE, INC.

# FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

07 JAN 16 PM 3:53

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

20565 NW 11th COURT MIAMI GARDENS, FL 33169

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE PURPOSE IS LAWN SERVICE

#### ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES @\$1.00 PAR VALUE PER SHARE

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT

LEMLEN T. SUBAHTU 20565 NW 11th COURT MIAMI GARDENS, FL 3310

#### <u>ARTICLE VI REGISTERED AGENT</u>

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

LEMLEN T. SUBAHTU 20565 NW 11th COURT MIAMI GARDENS, FL 33169

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BERNARD KOPET, P.A. 20170 PINES BLVD. - SUITE #302 PEMBROKE PINES, FL 33029

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I µm familiar with and accept the appointment as registered agent and agree to act in this capacity

| D len flow                 | ر مدارار  |
|----------------------------|-----------|
| Signature/Registered Agent | Date      |
| Sen Kend                   | ر مدارا ا |
| Signature/Incomporator     | Date      |