

(Re	questor's Name)	
(Ad	dress)	<u></u>
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP		MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies Certificates of Status		
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: Erma's Lawn and Landscape Maintenance, 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: Patricia A. Jones

Name (Printed or typed)

2417 South Bascombe Avenue

Address

Homosassa, Florida 34448

City, State & Zip

(352) 628-9984

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:

Erma's Lawn and Landscape Maintenance, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2417 South Bascombe Avenue- Homosassa, Florida 34448

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide professional services and care to the private sector in lawn and landscape maintenance in an efficient and cost effective manner.

#### ARTICLE IV SHARES

The number of shares of stock is: 100 Shares

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

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

Thomas G. Ermatinger - President Patricia A. Jones-Vice President Debra L. Mire - Secretary and Treasurer

#### ARTICLE VI **REGISTERED AGENT**

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

Patricia A. Jones 2417 South Bascombe Avenue Homosassa, Florida 34448

#### ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

Patricia A. Jones 2417 South Bascombe Avenue Homosassa, Florida 34448

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

Signature/Registered Agent

Signature/Incomporator

19 7 Date 19 7 Date 19 7 Date

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