

PO 7000038087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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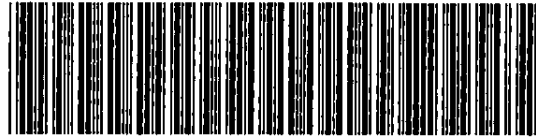
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 MAR 26 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2A

COVER LETTER

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

SUBJECT: Mow Better, 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: Michael Grisofe

Name (Printed or typed)

2174 Cape Way

Address

N. Ft. Myers, Florida 33917

City, State & Zip

239-645-8987

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:

Mow Better, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2174 Cape Way, N. Ft. Myers, FL 33917

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct business for the purpose of profit as a professional corporation providing lawn services.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Grisofe - President
2174 Cape Way
N. Ft. Myers, FL 33917

ARTICLE VI REGISTERED AGENT

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

Michael Grisofe
2174 Cape Way
N. Ft. Myers, FL 33917

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Grisofe
2174 Cape Way
N. Ft. Myers, FL 33917

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/Incorporator

3.20.07

Date

3.20.07

Date

FILED
07 MAR 26 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA