# P07000068578

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	9 #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



600103417866

06/11/07--01011--014 \*\*78.75

Z007 JUN 11 PM 3: 40
SECRETARY OF STATE

و ا فا و



# **COVER LETTER**

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

SUBJECT:	E-Z GREEN	INC. TENAME-MUSTINCE		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
England are an aria	inal and ano (1) anny of the out	iolog of incomposition one	l a abaols fam	
Eliciosed are all orig	inal and one (1) copy of the art	icles of incorporation and	a check for.	
\$70.00	\$78.75	□ \$78.75	`□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		ADDITIONAL CO	Status	
	·	ADDITIONAL CO	DP1 REQUIRED	
FROM:	KEITH AND	ERSON		
FROM: KEITH ANDERSON Name (Printed or typed)				
		•		
1564 TRALEE CT. No.				
Address				
		· · · · · · · · · · · · · · · · · · ·		
:	JACKSON VILLE City	FORIDA	3222/	
City, State & Zip				
	907 200 20	00 / 00	not /200	
•	903 288 38 Daytime	Telephone number	781 1777	

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

The name of the corporation shall be:

E-Z GREEN INC

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1564 TRALEE CT JACKSONVIlle FL 32221 ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MARKET & distribute A SPriNKler

### ARTICLE IV SHARES

The number of shares of stock is:

2000,000

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KENTH ANDERSON LA 1564 TRAINS OF, 32221

CHISTOPHEL Green, Wice PrisideNT 1343 Breckentidge St SAN LegudRO, CA RTICLE VI REGISTERED ACENT

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

3222/

SAMR **INCORPORATOR** 

The name and address of the Incorporator is:

Sawille FloridA 3222/

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/Incorporator