

P07000088861

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

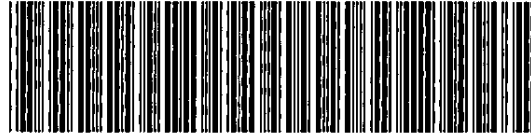
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07-26554

COVER LETTER

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

SUBJECT: GRASS LOVER ENTERPRISES 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 R. Glover Jr
Name (Printed or typed)

309 Magnolia St
Address

Altamonte Springs, Fla. 32701
City, State & Zip

(C) 904-651-3201 ; 407-702-2695 (H)
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 15, 2007

MICHAEL K GLOVER JR
309 MAGNOLIA ST
ALTAMONTE SPRINGS, FL 32701

SUBJECT: GRASS LOVER ENTERPRISE INC.
Ref. Number: W07000028554

We have received your document for GRASS LOVER ENTERPRISE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Specialist
New Filing Section

Letter Number: 707A00040281

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:

Grass Lover Enterprise Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

309 Magnolia St. Altamonte Springs Fl 32701

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Lawn Care

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael K. Glover Jr- Owner, and operator
309 Magnolia St
Altamonte Springs Fl. 32701

ARTICLE VI REGISTERED AGENT

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

Michael K. Glover Jr.
309 Magnolia St.
Altamonte Springs Fl. 32701

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael K. Glover Jr.
309 Magnolia St
Altamonte Springs Fl. 32701

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

Michael K. Glover Jr.
Signature/Registered Agent

Michael K. Glover Jr.
Signature/Incorporator

7/12/07
Date

7/12/07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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