

PO7000093624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

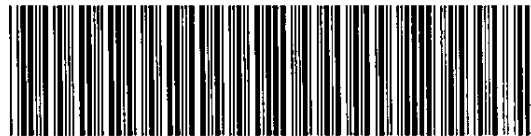
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 AUG 21 PM 12:47

STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

07 AUG 21 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VAH

## COVER LETTER

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

SUBJECT: Gaines Landscaping 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: Lloyd E. Gaines  
Name (Printed or typed)

11655 Old Federal Road  
Address

Quincy, Florida 32351  
City, State & Zip

850-566-1942 or 850-627-7044  
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:

Gaines Landscaping Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

11655 Old Federal Road  
Quincy, Florida 32351

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Landsaping Company

### **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):

Lloyd E. Gaines-Owner

### **ARTICLE VI REGISTERED AGENT**

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

Lloyd E. Gaines  
11655 Old Federal Road  
Quincy,Florida 32351

### **ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Lloyd E. Gaines  
11655 Old Federal Road  
Quincy,Florida 32351

\*\*\*\*\*

*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

**FILED**

07 AUG 21 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/16/2007

Date

8/16/2007

Date