

P07000121106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

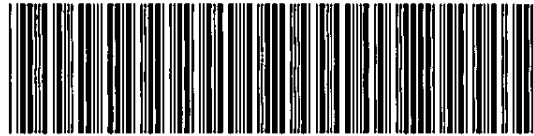
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/07/07--01025--015 **87.50

RECEIVED

07 NOV -7 PM 1:10

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

07 NOV -7 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: ALL YOU NEED SODDING, 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: MR. KAREY FREEMAN

Name (Printed or typed)

114 THOMPSON CIRCLE

Address

TALLAHASSEE, FLORIDA 32312

City, State & Zip

(850) 241 2950

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:

ALL YOU NEED SODDING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

114 THOMPSON CIRCLE

TALLAHASSEE, FLORIDA 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PERFORM ANY AND ALL LAWFUL BUSINESS WITHIN THE STATE OF
FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

THE NUMBER OF SHARES OF STOCKS THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS TWO STOCKS.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MR. KAREY FREEMAN

114 THOMPSON CIRCLE

TALLAHASSEE, FL 32312

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI REGISTERED AGENT

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

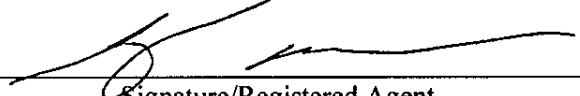
MR. KAREY FREEMAN
114 THOMPSON CIRCLE
TALLAHASSEE, FLORIDA 32312

ARTICLE VII INCORPORATOR

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

MR. KAREY FREEMAN
114 THOMPSON CIRCLE
TALLAHASSEE, FLORIDA 32312

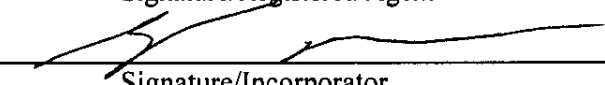
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10/24/2007

Date



Signature/Incorporator

10/24/2007

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA