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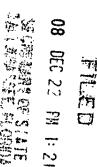
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COVER LETTER

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

SUBJECT: A SUI	PERIOR TREE SERVICE & PAVI (PROPOSED CORPOR	NG, INC. ATE NAME – <u>MUST INCI</u>	UDE SUFFIX)
	ginal and one (1) copy of the art		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM:	CECIL D. REID	e (Printed or typed)	
	4275 N. HINSON AVE	Address .	<u></u>
	HAINES CITY, FLORIDA 3384	4 y, State & Zip	······································
	407-791-8872 Daytime	Telephone number	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 9, 2008

CECIL D REID 4275 N HINSON AVE HAINES CITY, FL 33844

SUBJECT: A SUPERIOR TREE SERVICE & PAVING, INC.

Ref. Number: W08000054714

We have received your document for A SUPERIOR TREE SERVICE & PAVING, INC. and your check(s) totaling \$78.75. 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. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected 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) 245-6052.

Letter Number: 708A00059741

Paisley A Alford Clerk New Filing Section

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

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:

A SUPERIOR TREE SERVICE & PAVING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

4275 N HINSON AVENUE HAINES CITY, FLORIDA 33844

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO DO BUSINESS IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of stock.

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): **CECIL D. REID** 4275 N. HINSON AVENUE HAINES CITY, FLORIDA 33844

REGISTERED AGENT ARTIÇLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: CECIL D. REID 4275 N. HINSON AVENUE

HAINES CITY, FLORIDA 33844

ARTICLE VII **INCORPORATOR**

The <u>name and address</u> of the Incorporator is:

CECIL D. REID 4275 N. HINSON AVENUE HAINES CITY, FLORIDA 33844

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

ignature/incorporator