PO 9 000046879

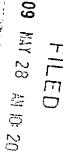
(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP		MAIL		
(Business Entity Name)				
(Du	Siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
	-			
Special Instructions to	Filing Officer:			

Office Use Only



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COVER LETTER

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

SUBJECT: ALL LA	WNS SERVICES INC (PROPOSED CORPOR	ATE NAME - <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
☐ \$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: <u>JE</u>	AN CELESTIN Name	(Printed or typed)	
	119 SW 68 AVENUE	Address	
	PEMBROKE PINES FL 33023 City	, State & Zip	
	786-290-0607	Telenhone 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:

The name of this Corporation is ALL LAWNS SERVICES INC

ARTICLE II PRINCIPAL OFFICE

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

119 SW 68 AVENUE PEMBROKE PINES FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation may engage in any activity or business permitted under the laws of the United States Of America and the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

Class A stock consisting of 1,000 shares of voting stock, each having \$.001 par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JEAN CELESTIN, PRESIDENT 119 SW 68 AVENUE PEMBROKE PINES FL 33023

ARTICLE VI REGISTERED AGENT

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

JEAN CELESTIN 119 SW 68 AVENUE PEMBROKE PINES FL 33023

ARTICLE VII INCORPORATOR

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

Signature/Incorporator

JEAN CELESTIN 119 SW 68 AVENUE PEMBROKE PINES FL 33023

***************	***********
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agent of	
Lan Celesti	04/21/2009
Signature/Registered/Agent	Date
/ / / / / ·	

04/21/2009

Date