

PO9000057686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

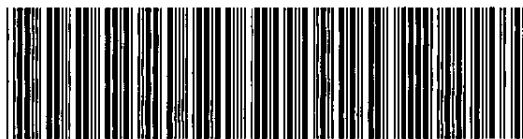
(Document Number)

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

Special Instructions to Filing Officer:

Richard P Mosall GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT II & IV add effective  
DATE 7/7/09 date  
DOC. EXAM VH

Office Use Only



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07/06/09--01031--005 \*\*78.75

09 JUL -6 PM 1:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

VH

**COVER LETTER**

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

*effective date 6/28/2009*

*RNA*

**SUBJECT:** Cutters Lawn Care 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** Richard P Mosall II  
Name (Printed or typed)

4543 29th Ave N  
Address

St Petersburg, FL 33713  
City, State & Zip

727-204-0981  
Daytime Telephone number

cutters@tampabay.rr.com  
E-mail address: (to be used for future annual report notification)

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

APPROVED  
AND  
FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

09 JUL -6 PM 1:29

**ARTICLE I NAME**

The name of the corporation shall be: **Cutters Lawn Care Inc.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

4543 29th Ave N  
St Petersburg, FL 33713

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ANY AND ALL LAWFUL BUSINESS**

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Richard P Mosall II (P) LISA E. MOSALL (VP)  
4543 29th Ave N  
St Petersburg, FL 33713  
Same

**ARTICLE VI REGISTERED AGENT**

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

Richard P Mosall II  
4543 29th Ave N  
St Petersburg, FL 33713

EFFECTIVE DATE 6/29/09

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Richard P Mosall II  
4543 29th Ave N  
St Petersburg, FL 33713

\*\*\*\*\*

*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

06-28-2009

Date



Signature/Incorporator

06-28-2009

Date