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Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT:	Knockout Lawn (PROPOSED CORPORA)	Service, INC	4 · · · · · · · · · · · · · · · · · · ·	
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCLU</u>	UDE 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	& Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: Robert E Davis Ja Name (Printed or typed)				
4762 Cap. Cir S.E				
Address				
Tailahassee H. 32311 City, State & Zip				
9L4-521-3468 Daytime Telephone number				
Daytime Telephone number				
	,			
E-mail address: (to be used for future annual report notification)				

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)	FILED
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Knockey Law Sev	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 4762 Tallah	Capital Circle S.E.
ARTICLE III PURPOSE The purpose for which the corporation is organized is: and and all	lautil business
ARTICLE IV SHARES The number of shares of stock is: 1	, ,
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): P. Robert Davis JC 1762 Capital Circle S. E. Iallahassee F1 323// ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the reserved in the second street address and the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) of the reserved in the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the second street address (P.O. Box NOT acceptable) and the se	Robert Davis Ta. egistered agent is: 4762 Cap Cir S.E. TallaMassie. 77. 32311
ARTICLE VII INCORPORATOR Robert Davis, IT The name and address of the Incorporator is: 4762 Cap Cir S.E. Tallahassie. Fl. 3251	:L
Having been named as registered agent to accept service of process for place designated in this certificate, I am familiar with and accept the apagree to act in this capacity	•
Signature/Registered Agent Signature/Incorporator	3 - 5 - 10 Date