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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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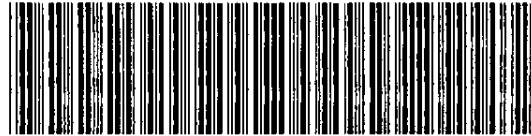
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/10/11--01005--014 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAR 10 AM 11:15

APPROVED
AND
FILED

JE/24

COVER LETTER

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

SUBJECT: LANDSCAPE SOLUTIONS USA, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: JAMES B. TARWATER

Name (Printed or typed)

410 LAKE CIRCLE DRIVE

Address

CANTONMENT, FL 32533

City, State & Zip

850-293-5255

Daytime Telephone number

jbtarwater@gmail.com

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)

ARTICLE I NAME

The name of the corporation shall be:

LANDSCAPE SOLUTIONS USA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address 390 Williams

~~410 LAKE CIRCLE DRIVE~~

CANTONMENT, FL 32533

DITCH

ROAD,

Mailing address, if different is:

PO BOX 324

CANTONMENT, FL 32533

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LANDSCAPE AND LAWN SERVICES FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES B. TARWATER

Address: 410 LAKE CIRCLE DRIVE

CANTONMENT, FL 32533

CEO

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: JAMES B. TARWATER

Address: 410 LAKE CIRCLE DRIVE

CANTONMENT, FL 32533

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JAMES B. TARWATER

Address: 410 LAKE CIRCLE DRIVE

CANTONMENT, FL 32533

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

JB

Required Signature/Registered Agent

3-1-2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

JB

Required Signature/Incorporator

3-1-2011
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAR 10 AM 11:23

APPROVED
AND
FILED