

P11000047795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

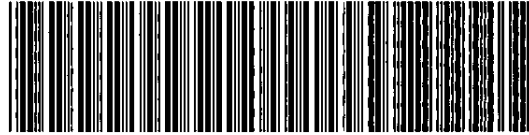
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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05/19/11--01005--010 \*\*70.00

T. Burch MAY 20 2011

## COVER LETTER

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

SUBJECT: West Coast Mowing, 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

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

FROM: Glen Keller

Name (Printed or typed)

5955 Phorus Rd

Address

Venice, FL 34293

City, State & Zip

941-809-3638

Daytime Telephone number

wcmowing@yahoo.com

E-mail address: (to be used for future annual report notification)

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

May 11, 2011

Re: Tracking # 200207417972

Dear State of Florida/Clairetha Golden:

I would like to incorporate the Name "West Coast Mowing, Inc." This letter is to certify that my former entity, "West Coast Mowing LLC" is no longer in existence and will not be reinstated. I am changing to: West Coast Mowing, Inc. We will be an S-Corp.

Please contact me directly if you require further information or have any questions.

Thank You,

Glen Keller  
President  
West Coast Mowing  
(941) 809-3638

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

**ARTICLE I NAME** West Coast Mowing, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
5955 Phorus Rd  
Venice, FL 34293

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
For Profit company

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: <u>Glen Keller President</u>	Name and Title: _____
Address: <u>5955 Phorus rd</u>	Address: _____
<u>Venice, FL 34293</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

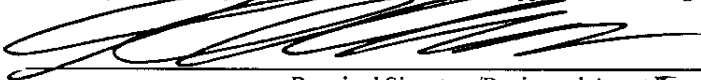
Name: Glen Keller  
Address: 5955 Phorus Rd  
Venice, FL 34293

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Glen Keller  
Address: 5955 Phorus Rd  
Venice, FL 34293

*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*



Required Signature/Registered Agent/Incorporator

5-16-11  
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.*