

P/2000099686

(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



600242299286

12/05/12--01009--006 **87.50

FILED
12 DEC -5 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/06/12

COVER LETTER

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

SUBJECT: CAMPBELL 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

<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: Dova N. Campbell

Name (Printed or typed)

206 Bob White Rd.

Address

Royal Palm Beach Fl. 33411

City, State & Zip

(561) 33411

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)

ARTICLE I NAME

The name of the corporation shall be: **CAMPBELL LAWN CARE INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

206 Bob White Rd.
Royal Palm Beach Fl. 33411

n/a

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Lawn care

ARTICLE IV SHARES

The number of shares of stock is: **500 shares of 1.00 each.**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dova N. Campbell (president) Name and Title: _____

Address: 206 Bob White Rd. Address: _____
Royal Palm Beach Fl. 33411

n/a

Name and Title: _____

Address: _____

n/a

Name and Title: _____

Address: _____

n/a

Name and Title: _____

Address: _____

n/a

Name and Title: _____

Address: _____

n/a

ARTICLE VI REGISTERED AGENT

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

Name: Dova N. Campbell
Address: 206 Bob White Rd.
Royal Palm Beach Fl 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dova N. Campbell
Address: 206 Bob White Rd.
Royal Palm Beach Fl. 33411

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

Dova Campbell

Required Signature/Registered Agent

November 30 2012

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.

Dova Campbell

Required Signature/Incorporator

November 30 2012

Date

FILED
12 DEC -5 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA