

P13000029304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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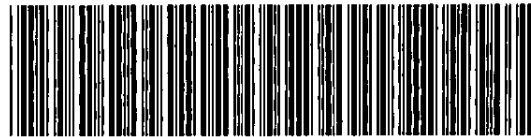
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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W13-13931

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13 MAR 29 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FL

ask

T. Burch APR 1 2013

COVER LETTER

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

SUBJECT: Firehouse Lawns & Landscapes 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: Tyson Pennazzo
Name (Printed or typed)

2662 SW Acco Rd
Address

Port St. Lucie FL 34953
City, State & Zip

734-915-8506
Daytime Telephone number

Fyrfighter88@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 11, 2013

TYSON PANNOZZO
2662 SW ACCO RD
PORT ST LUCIE, FL 34953

SUBJECT: FIREHOUSE LAWNS & LANDSCAPES INC.
Ref. Number: W13000013931

We have received your document for FIREHOUSE LAWNS & LANDSCAPES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 613A00005697



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 26, 2013

TYSON PANNOZZO
2662 SW ACCO RD
PORT ST LUCIE, FL 34953

SUBJECT: FIREHOUSE LAWNS & LANDSCAPES INC.
Ref. Number: W13000013931

We have received your document for FIREHOUSE LAWNS & LANDSCAPES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 813A00007140

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: Firehouse Lawns & Landscapes Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

21602 SW Acco Rd
Port St. Lucie, FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To establish a legally recognizable
lawn and landscaping service.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tyson Pannozzo (owner) → president Name and Title: _____

Address: 21602 SW Acco Rd Address: _____

Port St. Lucie, FL 34953

Name and Title: Lorraine Pannozzo (vice president) Name and Title: _____

Address: 21602 SW Acco Rd Address: _____

Port St. Lucie, FL 34953

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FL

(conti.)

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: Tyson Pannozzo
Address: 2002 SW Acco Rd
Port St. Lucie, FL 34953

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TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tyson Pannozzo
Address: 2002 SW Acco Rd
Port St. Lucie, FL 34953

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

Ty Pannozzo
Required Signature/Registered Agent

3/27/13
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.

Ty Pannozzo
Required Signature/Incorporator

3/27/13
Date