

| (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: | | | | |
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FLORIDA DEPARTMENT OF STATE Division of Corporations SEGIL AND STATE TALLAMASSEE, FLORIDA

April 29, 2014

PATRICK HERMAN 328 GREENWOODS DR LAKELAND, FL 33813

SUBJECT: BEST LAWN AND FENCE INC.

Ref. Number: W14000004657

We have received your document for BEST LAWN AND FENCE INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate the individual whose typed signature appears on the registered agent signature line.

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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 714A00009090

COVER LETTER

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

11 . 7.

| SUBJECT: BOST LOWN AND FERRE TIV. (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 ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED | Kiting \$ 70- | | |
| FROM: Patrick J. Herman Name (Printed or typed) 328 Green woods Dr. | | | | | | |
| Laxeland FL 33813 City, State & Zip | | | | | | |
| Daytime Telephone number Daytime Telephone number | | | | | | |

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)

| The name of the corpo | AME pration shall be: | was and | Fence In | ·C . | |
|--------------------------------------|--|---------------|--|----------------------|--|
| ARTICLE II PI | Principal street address | | Mailing addres $\mathbb{R}_{\cdot 0}$, \mathbb{R}_{0} | ss, if different is: | |
| ARTICLE III PU The purpose for which | RPOSE the corporation is organized is: Tion & Repair | Lawn Co | ire Lande | xaping, | |
| The number of shares | | | | 1 NUC 31 | SEPRICE SERVICE SERVIC |
| | HILL OFFICERS AND/OR D HO: Patrick Hesman 1 BOS Exercised Laxeland FL 3 | Prosidentiame | | AM 9: 30 | |
| Name and Titi Address | e: Elizabath Herman 308 Grean voods Laxeland F1 33 | Addre | | | - - - |
| Name and Titi Address | 150 Lisa Len | Name : | and Title: | | |

| Name and Title: | Name and Title: | | | | | |
|--|--|--|--|--|--|--|
| Address | Address: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT a | acceptable) of the registered agent is: | | | | | |
| | erce for Patrick Herman | | | | | |
| Address: 327 Excessions | _ | | | | | |
| Loxelood KL3 | 3813 Lakeland FL 33813 | | | | | |
| ARTICLE VII INCORPORATOR | | | | | | |
| The name and address of the Incorporator is: | | | | | | |
| Name: Patrick Herrs | 200 | | | | | |
| Address: 328 Green w | ods Or | | | | | |
| Lardond FL | <u>38813</u> | | | | | |
| | ice of process for the above stated corporation at the place designated in ntment as registered agent and agree to act in this capacity | | | | | |
| Rot He | 1/8/14 | | | | | |
| Required Signature/Registere | od Agent 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 2.817.155, F.S. | | | | | | |
| for Ham | 1/8/14 | | | | | |
| Required Signature/Incorpo | orator Date | | | | | |
| | | | | | | |
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