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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

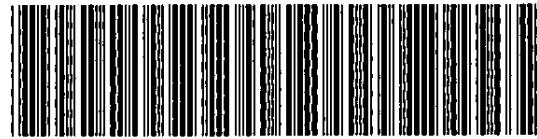
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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S. GILBERT

COVER LETTER

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

SUBJECT: LEANDER'S PROFESSIONAL LANDSCAPE AND LAWN CARE SERVICES, 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: LEANDER MCKENZIE, JR.
Name (Printed or typed)

8357 MILES JOHNSON ROAD
Address

TALLAHASSEE, FLORIDA 32309
City, State & Zip

(850) 294-4575

Daytime Telephone number

MCKENZIEFAME@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: LEANDER'S PROFESSIONAL LANDSCAPE AND LAWN CARE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

8357 MILES JOHNSON ROAD
TALLAHASSEE, FLORIDA
32309

Mailing address, if different is:

12182 PO BOX 12182
TALLAHASSEE, FLORIDA
32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LANDSCAPE AND LAWN CARE SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

15
1993
PH 4:15
REC'D
FLORIDA
CORPORATION
COMMISSION

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LEANDER MCKENZIE, JR (OWNER/CEO) Name and Title: _____

Address: PO BOX 12182 Address: _____
TALLAHASSEE, FLORIDA
32317

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(cont.)

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: LEANDER MCKENZIE JR

Address: 8357 MILES JOHNSON ROAD
TALLAHASSEE, FL 32309

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: LEANDER MCKENZIE, JR.

Address: 8357 MILES JOHNSON ROAD
TALLAHASSEE, FL, 32309

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

Leand Mckenzie Jr

Required Signature/Registered Agent

4/13/15

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.

Leand Mckenzie Jr

Required Signature/Incorporator

4/13/15

Date