## P15000048380

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	<del>;</del> #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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06/01/15--01009--008 \*\*78.75

15 JUN - 1 PM N: 58

T. Busch JUN 2 2015

## **COVER LETTER**

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

Hydroponicsforhome Inc.

	ginal and one (1) copy of the art	ticles of incorporation and	d 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 o Status
		ADDITIONAL CO	OPY REQUIRED
FROM:	mothy J. Ellis Nam 23 Warren Park Road	e (Printed or typed)	
		Address	· · · · · · · · · · · · · · · · · · ·
Ве	lle Isle, Florida 32812		
_	City,	State & Zip	
32	1/689-1688		
32		Celephone 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 corpora	E Hydroponicsforhome Incation shall be:		
ARTICLE II PRING 3423 Warren Park Roa	CIPAL OFFICE Principal street address		ress, if different is:
Belle Isle, Florida 328			
ARTICLE III PURP The purpose for which any and all activities or	OSE the corporation is organized is: This c r business permitted under the laws of	orporation is organized for the purp the State of Florida and the United	ose of engaging in States of America.
			7
ARTICLE IV SHAR The number of shares o			ASSECTECTOR ASSECTED BY THE SE
Name and Title	AL OFFICERS AND/OR DIRECTOR Timothy J. Ellis, President	Name and Title:	
Address	3423 Warren Park Road		
	Belle Isle, Florida 32812		
		·	
Name and Title	e:	Name and Title:	
Address		Address:	
Name and Title	3:	Name and Title:	
Address		Address:	
		<del> </del>	.,

Name :	and Title:	Name and Title:
Addre	SS	Address:
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) of the Timothy J. Ellis	ne registered agent is:
Address:	3423 Warren Park Road	
	Belle Isle, Florida 32812	
<u>ARTICLE VII</u>	INCORPORATOR	PH L: 58
The <u>name and</u>	address of the Incorporator is:	
Name:	Timothy J. Ellis	
Address:	3423 Warren Park Road	
	Belle Isle, Florida 32812	
ARTICLE VII	EFFECTIVE DATE:	
(If an effective days after the Note: If the days		pe more than five business days prior or 90 business attutory filing requirements, this date will not be listed as
this certificate,	amed as registered agent to accept service of process for a lam familiar with and accept the appointment as regis	•
	Required Signature/Registered Agent	5-27-2015  Date  ue. I am aware that the false information submitted in
	e Department of State constitutes a third degree felony	
Jui	uired Signature/Incorporator	5-27-20/5 Date

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