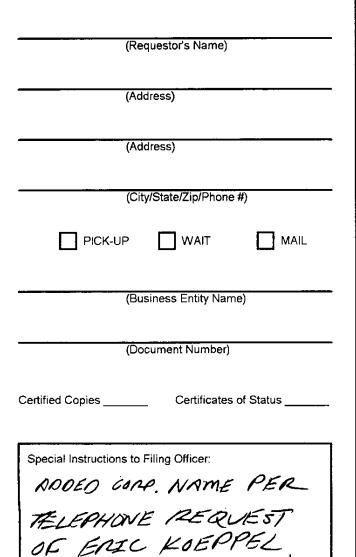
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATION

1 08/26/15

(WIS-56795)

COVER LETTER

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

SUBJECT:	gant Gardens Inc.						
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)						
Enclosed are an o	original and one (1) copy of the art	icles of incorporation and	l a check for:				
☐ \$70.00 Filing Fee	• • • • • • • • • • • • • • • • • • • •	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED				
Constant							
FROM:	Eric Koeppel Name (Printed or typed)						
1	11102 Stonewood Forest Trail						
-	Address						

Boynton beach, FL 33473

ekoeppel1030@gmail.com

561-236-5774

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

City, State & Zip

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpora	ation shall be: ELEGART UN	NOSCAPE AND DEST	IGN, INC.
ARTICLE II PRINC		Mailing address, if different is:	
Boynton Beach, FL 334			
	OSE the corporation is organized is:	Care Maintenance, Landscae Design a	nd installation
			DIVISION O
			ARY OF STATE OF CORPORATION OF CORPO
ARTICLE IV SHAR The number of shares of	ES 1000 Stock is:		F 7
ARTICLE V INITL Name and Titl	AL OFFICERS AND/OR DIRECTORS Eric Koeppel, President	Name and Title:	
	11102 Stonewood Forest Trail		
	Boynton Beach, FL 33473		
Name and Title	:	Name and Title:	
Address		Address:	
Name and Title		Name and Title:	
Address			
	, , , , , , , , , , , , , , , , , , ,		,

Name a	nd Title:	Name and Title:	
Addres		Address:	AMATTA
ARTICLE VI	REGISTERED AGENT	t-> . 641 '-4 1 4 '	
Name:	Florida street address (P.O. Box NOT acceptal Eric Koeppel	ore) of the registered agent is.	
Address:	11102 Stonewood Forest Trail		
	Boynton beach, FL 33473		J.
			AL
ARTICLE VII	<u>INCORPORATOR</u>		FILE ECRETARY SION OF CO AUG 20
The name and a	address of the Incorporator is:		O CONTE
Name:	Eric Koeppel		PHI2: 04
Address:	11102 Stonewood Forest Trail		12: 04 RATION:
	Boynton Beach, FL 33473		,,
Effective date, i	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and ciling.)	(OPTIONAL) annot be more than five business da	ays prior or 90 business
	re inserted in this block does not meet the applie effective date on the Department of State's reco		s date will not be listed as
Having been na this certificate, l	med as registered agent to accept service of pi an familiar with and accept the appointment	ocess for the above stated corporations as registered agent and agree to act in	n at the place designated in this capacity
	In 1/2		8/18/15
	Required/Signature/Registered Agen		/ Date
I submit this do document to the	cument and affirm that the facts stated hereio Department of State constitutes a third degree	are true. I am aware that the false felony as provided for in s.817.155, F	information submitted in a .S. /
	In Ka		Slatelis
Réqu	ired Signatur Incorporator		Date