P16000077047

(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:				





900290356579

09/19/16--01010--001 **70.00

SEURITARY OF STATE STATE SEURITARY OF STATE STATION OF CORPORATION

~ 09/20/16

COVER LETTER

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

Kenny Roth Mowing Inc.

SUBJECT: Ker	nny Roth Mowing Inc.		
	(PROPOSED CORPO	DRATE NAME - <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the	articles of incorporation and	d a check for:
■ \$70.0 Filing Fe	·	□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status
	ADDITIONAL COPY RE		DPY REQUIRED
FROM:	Kenneth Roth	ame (Printed or typed)	
	1412 Gilpin Ave		
		Address	
	Lakeland, Fl 33803		
	C	ity, State & Zip	
	863-581-3445		
	Daytin	ne Telephone number	
	beckihouston@yahoo.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 II PRINC	ion shall be: Kenny Roth Mowing		
	Principal street address	Mailing address.	if different is:
Lakeland, Fl 33803			
·	-		
		-	
ARTICLE III PURPO The purpose for which the	<u>AI</u> ne corporation is organized is:	ny and all lawful business	
			· sent
			6 750 8
			<u> </u>
			STATE DRATIONS 4 2: 57
			1160 57
			S
	L OFFICERS AND/OR DIRECT		
Address	1412 Gilpin Ave		
	Lakeland, FL 33803		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address			

Name a	and Title:	Name and Title:		
Addres	ss	Address:		
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:	·	
Name:	Kenneth Roth II	oter of the regimered agent is.		
_	1412 Gilpin Ave		=	
	Lakeland, Fl 33803	-	SECR VISION	
ARTICLE VII	INCORPORATOR		FILE LOF CO P 19	
The name and a	address of the Incorporator is:		PM 2	
Name:	Kenneth Roth II	·	F STATE PORATIONS M 2: 57	
Address:	1412 Gilpin Ave		ONS 7	
	Lakeland, Fl 33803			
Effective date, i (If an effective days after the i Note: If the day	if other than the date of filing: date is listed, the date must be specific and filing.) te inserted in this block does not meet the appl effective date on the Department of State's rec	cannot be more than five busine icable statutory filing requirement	ess days prior or 90 business	
Having been no	amed as registered agent to accept service of p I am familiar with and accept the appointment	rocess for the above stated corpo		
_ Kens	noth Roth Required Signature/Registered Ages		09/14/2016	
			Date	
	ocument and affirm that the facts stated here of Department of State constitutes a third degree			
Vonn	noth Drada		09/14/2016	
Required Signature/Incorporator			Date	