

P20000076860

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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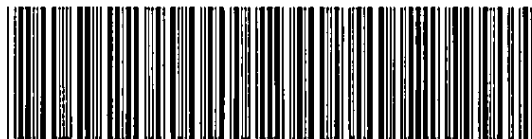
(Business Entity Name)

(Document Number)

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OCT 02 2020

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COVER LETTER

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

SUBJECT: Hillman Lawn Care 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: Regina Taylor
Name (Printed or typed)

3485 Peter Dr
Address

Daphne FL 34112
City, State & Zip

410-471-8037
Daytime Telephone number

Taylorregina516@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: Hillsman Lawn Care Inc

ARTICLE II PRINCIPAL OFFICE

1100 5th Ave Principal street address
Dept 201
Naples FL 34102

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: all Legal Business

ARTICLE IV SHARES

The number of shares of stock is: 500,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Begina Taylor

Address: 3495 petal St
Naples FL 34112

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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TALLAHASSEE, FL

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: Regina Taylor
Address: 3845 ~~Petal Dr~~ FL
Naples FL 34112

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STATE OF FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Regina Taylor
Address: 3488 Petal Dr
Naples FL 34112

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 9/30/20 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

RTaylor _____
Required Signature/Registered 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 s.817.155, F.S.

RTaylor _____
Required Signature/Incorporator Date