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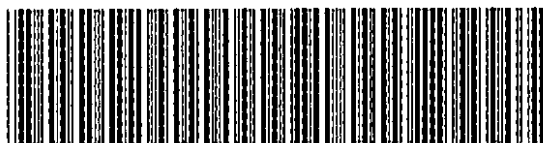
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December 3, 2020

Florida Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: SCRUB WETLAND OF LAKE WALES RIDGE FLORIDA, INC.

Dear Sir or Madam:

Enclosed herewith is the Articles of Incorporation for the above-named corporation and a copy of the letter you sent to our office on November 23, 2020.

Please file the enclosed Articles of Incorporation and return a certified copy to the undersigned in the self-addressed stamped envelope.

Your prompt attention to this matter would be appreciated.

Sincerely,

Michael M. Disler
Michael M. Disler

MMD/ts
enclosures: as stated herein

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ARTICLES OF INCORPORATION

OF

SCRUB WETLAND OF LAKE WALES RIDGE FLORIDA, INC.

The undersigned, acting as Incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

1. **NAME:** The name of this corporation shall be:
SCRUB WETLAND OF LAKE WALES RIDGE FLORIDA, INC.

2. **PRINCIPAL OFFICE AND MAILING ADDRESS:**

**3249 STATE ROAD 60 E
PMB #3
LAKE WALES, FLORIDA 33898**

3. **PURPOSE AND DURATION:** The purpose is to engage in any activities or business as permitted under the laws of the United States and Florida and the period of its duration is perpetual.

4. **CAPITAL STOCKS:** The corporation is authorized to issue 1000 shares, all of one class, at \$1.00 par value.

5. **INITIAL REGISTERED OFFICE AND AGENT:** The name and address of the initial registered agent and office of this corporation is as follows:

**JAMES STONE
3249 STATE ROAD 60 E
PMB #3
LAKE WALES, FLORIDA 33898**

6. **INITIAL BOARD OF DIRECTORS:** This corporation shall have three (3) director initially. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law, but shall never be less than one (1).

The names and addresses of the initial directors of this corporation are:

NAME

ADDRESS

JAMES STONE
President

3249 State Road 60 E
PMB #3
Lake Wales, FL 33898

ROSS MOORE
Vice President

3249 State Road 60 E
PMB #3
Lake Wales, FL 33898

AMBER MOORE
Treasurer/Secretary

3249 State Road 60 E
PMB #3
Lake Wales, FL 33898

7. **INCORPORATIONS:** The name and address of the Incorporator signing these Articles of Incorporation is MICHAEL M. DISLER, 143 E. Center Avenue, Sebring, Florida 33870.

8. **AMENDMENT OF ARTICLES:** This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 9 day of November, 2020.

Michael M. Disler

Michael M. Disler, Incorporator

STATE OF FLORIDA
COUNTY OF HIGHLANDS

BEFORE ME, the undersigned authority, personally appeared Michael M. Disler, to me known to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 9 day of November, 2020.



Kristina M. Sharpe
Notary Public

My Commission Expires:


**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of §607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: **SCRUB WETLAND OF LAKE WALES RIDGE
FLORIDA, INC.**

2. The name and registered agent and office is:

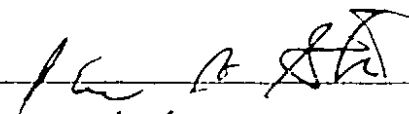
**JAMES STONE
3249 STATE ROAD 60 E
PMB #3
LAKE WALES, FLORIDA 33898**



Corporate Officer, Director
October, 2020

2010/10/16 Filed

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



October, 2020