

P220 0000 5137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

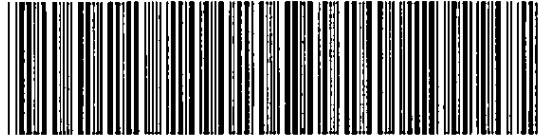
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 JAN 19 PM 2:28

D. O'KEEFE

JAN 27 2022

✓

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: The Wicked Gardener, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1142 Vernon Place
Marcos Island, FL 34145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

On line gardening show

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eileen Ward/President Name and Title: _____

Address 1142 Vernon Place Address: _____
Marcos Island FL
34145

Name and Title: Peter Ward/V.Pres. Name and Title: _____

Address 1142 Vernon Place Address: _____
Marcos Island, FL
34145

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: Eileen Ward

Address: 1142 Vernon Place
Marcos Island, FL 34145

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Eileen Ward

Address: 1142 Vernon Place
Marcos Island, FL 34145

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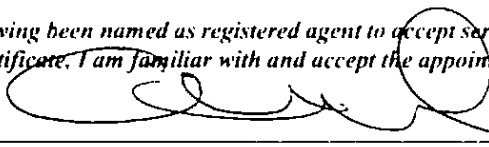
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

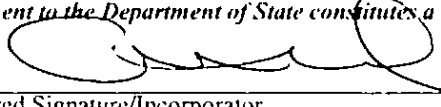
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Required Signature/Registered Agent

1/12/2022
Date *EW*

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.



Required Signature/Incorporator

Eileen Ward

Date

1/12/2022