

P24000025904Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
WEISS LAWN CARE OF FLORIDA CORP

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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TALLAHASSEE, FLORIDA

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: WEISS LAWNCARE OF FLORIDA Corp

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

3500 SE 33 TR.
OKEECHOBEE, FL. 34974

Mailing address, if different is:

3500 SE 33 TR.
OKEECHOBEE, FL. 34974

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL PURPOSES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANTHONY WEISS

Address: PRESIDENT

3500 SE 33 TR.

OKEECHOBEE, FL. 34974

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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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: ANTHONY WEISS
Address: 3500 SE 33 TR.
OKEECHOBEE, FL. 34974

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANTHONY WEISS
Address: 3500 SE 33 TR.
OKEECHOBEE, FL. 34974

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/09/2024 (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 further with and accept the appointment as registered agent and agree to act in this capacity

[Signature]
Required Signature/Registered Agent

04/09/2024
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.

[Signature]
Required Signature/Incorporator

04/09/24
Date