# P95000028647

BROWNE DISTRIBUTORS

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

COCOCO 1 44407770 -03/27/95--01105--001 \*\*\*\*131.25

And scape Suppliers, INC. SUBJECT: \_ (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: **₹70.00** \$78.75 \$122.50 **131.25** Filing Fee, Certified Copy & Certificate Filing Fee & Certificate Filing Fee & Certified Copy Filing Fee Additional Copy Required PATRICIA A. ROLUNE
Name (printed or typed) FROM: P.O. Box 849 Address 904-326-8461 Daytime Telephone number

NOTE: Please provide the original and one copy of the



March 28, 1995

PATRICIA A. BROWNE P.O. BOX 849 FRUITLAND PARK, FL 34731

SUBJECT: BROWNE DISTRIBUTORS LANDSCAPE SUPPLIERS, INC. Ref. Number: W95000006755

We have received your document for BROWNE DISTRIBUTORS LANDSCAPE SUPPLIERS, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filling of your document, please call (904) 487-6915.

Kevin Nickens Document Specialist

Letter Number: 895A00013881



### ARTICLES OF INCORPORATION 95 APR 12 AM 10:54

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

Browne Distributors LANdscape Supplier, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PATRICIA A. Browne 2600 N. Hwy 441 + 27 FRUITIAND PARK, FT. 34731

#### ARTICLE V INCORPORATORIS

The name(s) and street address(as) of the incorporator(s) to these Articles of Incorporation is(are):

The undersigned incorporator(s) has(have) executed these Articles of incorporation this

<u> 31 57</u>	day of	VAROLI	_, 19 <u></u>
	John a.	4	
	John Ca.	Signature	<u> </u>
<del></del> -	<del></del>	Signature	
		Signature	

Articles of Incorporation Filing Fee - \$35

FRICE TARY OF STATE DIVISION OF CORPORATIONS

## CERTIFICATE OF DESIGNATION OF 95 APR 12 AM 10:514 REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 807.0501 or 617.0501, 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: BROWNE DISTRIBUTORS
LAMOSCAPE Suppliers, INC.
2. The name and address of the registered agent and office is:
Patricia A. Browne
(Name)
_ 2600 N. HWY 2141 & 27
(P.O. Box or Mail Drop Box NOT acceptable)
Fruitiano Park, Fi. 34731
(City/State/Zip)
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.
(Signature) 3-20-95 (Date)