

FA 13:24 04/28/95
H95000004791

SEALS N SIGNATURES

813-367-1422

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FAX AUDIT PAGE 01
H95000004791

April 28, 1995

4/28/95 FLORIDA DIVISION OF CORPORATIONS 12:55 AM
PUBLIC ACCESS SYSTEM
(((H95000004791))) ELECTRONIC FILING COVER SHEET
TO: DIVISION OF CORPORATIONS FROM: SEALS N SIGNATURES
DEPARTMENT OF STATE 6822 N 22ND AVE
STATE OF FLORIDA SUITE 277
409 EAST GAINES STREET ST. PETERSBURG FL 33710-
TALLAHASSEE, FL 32399 CONTACT: JOANNE SIRISKA
FAX: (904) 922-4000 PHONE: (813) 367-3459
FAX: (813) 363-1422
(((H95000004791))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: ACCURATE LANDSCAPING INC.
FAX AUDIT NUMBER: H95000004791 CURRENT STATUS: REQUESTED
DATE REQUESTED: 04/28/1995 TIME REQUESTED: 12:55:07
CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 0
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PROF
243 PAGES
1095-9124

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FAX AUDIT #
H95000004791



FLORIDA DEPARTMENT OF STATE
Sandra D. Mortham
Secretary of State

May 2, 1995

SEALS N SIGNATURES

ST. PETERSBURG, FL 33710

SUBJECT: ACCURATE LANDSCAPING INC.
REF: W9500009124

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

ONLY RECTIFIED R.A. CERTIFICATE, PLEASE RE-FAX 1 AND 2ND PAGE.

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 filing of your document, please call (904) 487-6934.

Loria Poole
Corporate Specialist

FAX Aud. #: H95000004791
Letter Number: 895A00021072

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

RECEIVED

02:30 PM 4-20-95

RECEIVED

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P.03

ARTICLES OF INCORPORATION

FAX AUDIT #
H95000004791

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:

ACCURATE LANDSCAPING INC.

ARTICLE II PRINCIPAL OFFICE

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

Place of Business

7017 GIBSTON DR
GIBSONTON FL. 33534

Mailing Address

P.O. BOX 1996
RIVERVIEW FL. 33569
ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOANNE SIRISKA/SEALS N SIGNATURES
6822 22ND AVE N SUITE 277
ST. PETERSBURG FL.
33710

FAX AUDIT #
H95000004791

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P.02

FAX AUDIT #
H95000004791

ARTICLE V INCORPORATOR(S)

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

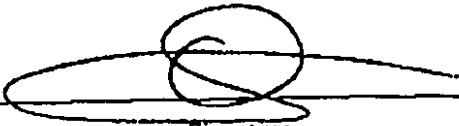
CHARLES FEARNOW
7017 GISONTON DR
GIBSONTON FL. 33579

GLORIA FEARNOW
7017 GIBSONTON DR
GIBSONTON FL. 33579

James William French
8724 Beverly Dr.
Temple TERR FL 33617

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

● 25 day of April, 19 95

● 
Signature

Signature

Signature

Signature

FAX AUDIT #
H95000004791

CERTIFICATE OF DESIGNATION OF FAX AUDIT #
H95000004791**REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN designates THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the corporation is:
ACCURATE LANDSCAPING INC.

2. The name and address of the registered agent and office is:

JOANNE SIRISKA/SEALS N SIGNATURES

(Name)

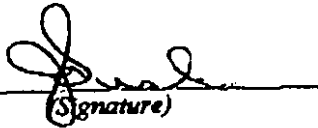
6822 22ND AVE N SUITE 277

(P.O. Box not acceptable)

ST. PETERSBURG
FL.
33710

(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)


(Date)