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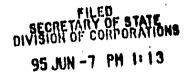
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THANK YOU from Your Capital Connection

# ARTICLES OF INCORPORATION

OF



# TROPIGREEN CUT FOLIAGE, INC.

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

#### ARTICLE I. NAME

The name of this corporation is TROPIGREEN CUT FOLIAGE, INC.

# ARTICLE II. PRINCIPAL OFFICE OR MAILING ADDRESS OF CORPORATION

The principal office and mailing address of this corporation is: 7071 No. 2 Road, Howey-In-The-Hills, Florida 34737.

# ARTICLE III. CAPITAL STOCK

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

Five thousand (5,000) shares of common stock all of one class, having a nominal or par value of ONE DOLLAR (\$1.00) per share.

# ARTICLE IV. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 1000 West Main Street, Leesburg, Florida 34748, and the name of the initial registered agent of this corporation at that address is Kevin A. Sentner.

SECRETARY OF STATE DIVISION OF CORPORATIONS

## ARTICLE V. INCORPORATOR

95 JUN -7 PM [: ]3

The arms and address of the person signing these Articles of Incorporation is James H. Mayfield, Jr., 7071 No. 2 Road, Howey-In-The-Hills, Florida 34737.

### ARTICLE VI. AMENDMENT

This corporation reserves the right to amend or repeal any provisions 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 subscriber has executed these Articles of Incorporation this  $\frac{\sqrt{4}}{3}$  day of June, 1995.

James H. Ma, field, Jr., Incorporator

## ACCEPTANCE BY REGISTERED AGENT:

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

Kewin A Sentner

STATE OF FLORIDA COUNTY OF LAKE

The foregoing instrument was acknowledged before me this day of June, 1995, by James H. Mayfield, Jr., Incorporator, who did not take an oath.

NOTARY PUBLIC-STATE OF FLORIDA (Signature of Notary)

[SEAL]

JANICE B. MANSFIELD Typed name of Notary)

(Commission Number)

Personally known or Produced Identification  $\underline{\nu}$ 

Type of Identification Produced: Fla. Ocion Vic

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