

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

000001508070 -06/08/95--01020--019 ****122.50 ** **122.50

SUBJECT: K&L LandScaping INC. (proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$ 122.50.

FROM:

Name (printed or typed)

1/295 Long Hill Ct

Spring Hill FL 34609

City, State, & Zip

904 686-5714

Telephone Number

Note: Please provide the original and one copy of the Articles.

TRANSMITTAL LETTER

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

SUBJECT: K& Landscaping 1/1C (proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$____/32.50_.

FROM:

Name (printed or typed)	1/2/5	Long	Hill	Ct
Address	Spring	Hill	FL	34609
City, State, & Zip	(904) (86-57/4			
Telephone Number				

Note: Please provide the original and one copy of the Articles.

ARTICLES OF INCORPORATION

<u>OF</u>

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: K& L Landscaping INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 11295 Long Hill Ct Spring Hill FL 34609

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Kevin Wlan

11295 Long Hill CF

Spring Hill FL

34609

ARTICLE V INCORPORATOR(S)

The name(s)	and street	address(es) o	f the incorpo	orator(s) to	these Article	es of Incorpora
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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 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: K\$L LandSCapin	Inc
	(1) (c) (c)
2. The name and address of the registered agent and office is:	E
Kevin Nolan	
(NAME)	
11295 Long Hill Ct	
(P.O. BOX NOT ACCEPTABLE)	
Spring Hill FL 34609	·
(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 APPOIN. JENT 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 PCSITION AS REGISTERED AGENT.

SIGNATURE / N/
DATE