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TRANSMITTAL LETTER

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

700001712977
-02/13/96--01026--012
****131.25 ****131.25

SUBJECT: BEAUTILAWN, INC.
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

ISABEL C. LANKFORD

Name (printed or typed)

1489 MEADOWBROOK RD., NE

Address

PALMBAY, FLORIDA 32905

City, State & Zip

(407) 676-4769

Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 FEB 12 AM 10:06

AL FEB 14 1995

NOTE: Please provide the original and one copy of the articles.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
196 FEB 12 AM 10:06

ARTICLES OF INCORPORATION

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: *BEAUTILAWN, INC.*

ARTICLE II PRINCIPAL OFFICE

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

*1489 MEADOWBROOK RD., NE
PALM BAY, FLORIDA 32905*

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:

*ISABEL C. LANKFORD
1489 MEADOWBROOK RD., NE
PALM BAY, FLORIDA 32905*

ARTICLE V INCORPORATOR(S)

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

ISABEL C. LANKFORD
1489 MEADOWBROOK RD, NE
PALM BAY, FLORIDA 32905

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

SECOND day of JANUARY, 1996.

Isabel C. Lankford

Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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CERTIFICATE OF DESIGNATION OF 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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: BEAUTILAWN, INC.

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

ISABEL C. LANKFORD
(Name)

1489 MEADOW BROOK RD, NE
(P.O. Box not acceptable)

PALM BAY, FLORIDA 32905
(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.

Isabel C. Lankford
(Signature)

1/2/96
(Date)