

P960000018288

TRANSMITTAL LETTER

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

10.0001727064
02/28/96 01075 005
*****70.00 *****70.00

SUBJECT: A&L LAWYER CARE SERVICE, 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

Additional Copy Required

FROM:

Daniel, Arthur B.
Name (printed or typed)

2953 Byington Place
Address

Tallahassee, FL 32303
City, State & Zip

(904) 562-7209
Daytime Telephone number

FILED
96 FEB 28 PM 12:49
RECEIVED
96 FEB 28 PM 12:32
SECRETARY OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

FILED

96 FEB 28 PM 12:49

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

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: A & L Lawn Care, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2953 Byington Place
Tallahassee, FL 32303

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lonnie E. Daniel
2953 Byington Place
Tallahassee, Florida 32303

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED

96 FEB 28 PM 12:49

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA ~~STATUTE~~ ^{SECRETARY OF STATE}
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: A & L Lawn Care, Inc.
2. The name and address of the registered agent and office is:

Lonnie E. Daniel
(NAME)

2953 Byington Place
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tallahassee, Florida 32303
(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.

Lonnie E. Daniel
(SIGNATURE)

28 Feb 96
(DATE)