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Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 32314	ns		• #	
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				7-00 10
Enclosed is an original	I and one (1) d	copy of the articles	of incorporatio	n and a check
Enclosed is an original for :	I and one (1) o	opy of the articles	of incorporatio	n and a check
for :			illing Fee, Certified Cop	n and a check
for :	[] \$78.75 Filing Fee	(X) \$122.50 Elling Fee	Filing Fee, Certified Cop & Certificate	n and a check
for : 970.00 Filling Fee	Filing Fee & Certificate	Image: Second State Filing Fee & Certified Copy Additional Copy	Filing Fee, Certified Cop & Certificate	n and a check
for :	Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	Filing Fee, Certified Cop & Certificate	n and a check
for : #70.00 Filing Fee	Filing Fee & Certificate	Image: Second	Filing Fee, Certified Cop & Certificate	n and a check
for : #70.00 Filling Fee	Filing Fee & Certificate	Image: Second	Filing Fee, Certified Cop & Certificate	n and a check

NOTE: Please provide the original and <u>one copy</u> of the articles.



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.

NAME

ARTICLE I

The name of the corporation shall be: HEK LAWAN SERVICE, TAIC.

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ARTICLE II **PRINCIPAL OFFICE**

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

5490 HOW ST. JACKSONVILLE, FI 32244

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:

SHARON HOENIGMANN 5490 110 TH ST.

JACKSONVILLE, FI 32244

ARTICLE V INCORPORATOR(S) See instructions for officers/directors

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

YUE Persi SHARON HOENIGMIANA

JACKSONVILLE, FI 32244

PRes.

JAMES KIMBALL 5496 HOTE ST. JACKSONVILLE, FI 32244

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

10 day of ______, 19_96.

(An additional article must be added if an effective date is requested.)

Sharen Helenigman James Vimfall Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:

HEK LAWN SERVICE, JAC.

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

SHAKON HOENIGMANN 5490 HOTH ST. (P.O. BOX OF MAIL DIOP BOX NOT ACCEPTABLE) 32244 JACKSONVILLE, FI (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 iservity 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.

Zlaenicemar $\frac{7-10-96}{(DATE)}$ (SIGNATURE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314