P96000003675

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

400001938244 -09/04/96--01093--010 ****122.50 ****122.50

SUBJECT: CA	EW CUT LAWN	& LANDSCAPING,	INC.			
(Pr	obased corporate	name - must includo sul	(fix)			
Enclosed is an original for :				and a	chec	ck
570.00	\$78.75	× \$122.50	\$131.25			
Filing fae	Filing Foo & Certificate	Filing Fee & Cardilad Copy	Filing Fee, Certified Copy & Certificate			
		Additional Copy	Required			
FROM:	Lucy 016)	rolamo				
	·	orinted or typed)				
		son Stherit Address				
	Pembroke (Pines, F1 33(12/	**			
City, State & Zip					133	
	(954) 430-	-9424			S	
	Daytime T	elephone number		A SE STATE	-3 Fii 2: 19	FILED

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

1. 5-94 10, 12

ARTICLES OF INCORPORATION

CHEW OUT LAWN & LANDSCAPING, INC.

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.

> of CHEW CUT LAWN & LANDSCAPING, INC.

ARTICLE I NAME

The name of the corporation shall be: GFEW GUT LAWN B LANDSGAFING, INC.

ARTICLE II PRINCIPAL OFFICE

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

4511 So. University Dr., Suite # 156 Davie, FL 33328

ARTICLE IIB - DUMATION The corporation shall have a perpetual existence.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 shares having a par value of \$1.00 per share. (\$1,000.00).

ARTICLE IIIa - PURPCISE The purpose of this corporation is to engage in any activities or business permitted under the laws of the United States and Floride.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Lucy DiGirolamo 4611 So. University Or., Suite # 156 Davie, FL 33328

ARTICLE IVa - INITIAL EDAFD OF DIRECTORS The names and addresses of the iritial Directors are:

> Darren M. VACHON and Lucy Didirolemo ZEll So. University, Dr., Suite # 156 Davie, FL 33328

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Ourren M. VACHON - Pres/Cir/Trees. 8920 Johnson Street Fombroke Pines, FL 33024

Lucy DiGirolamo - V.Pres/Dir/Secry. 4611 So. University Orivo, Sulta 156 Davio, FL 33328 and 8920 Johnson Street Fembroka Pines, FL 33024

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 24-L day of 906.

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

Latrer M. VACHON Signature Pres/Dir/Tress.

Lucy Didirolano Signature V.Pras/Dir/Sast

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.

t.	The name of the corporation is:	CHEW OUT LAWN & LANDSCAPING, INC.						
		4611 So.	University	Dr.,	Su!te #	156		
		Davie, FL	3328	' 	······································			
2.	The name and address of the reg	istered agent a	nd office is:					
		Lucy DiGI	rolemo					
		V.Pres.,	Dir., 8 Sec	iry.				
		(NA	ME)	······································		28	93	
	8920 Johnson Street					C)	SEP	
							ن-'	771
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)						ယ်	
		Fumbroke (Pines, FL 3	13024			<u> </u>	ΞD
		(City/St	ATF/ZIP)				ι	
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flaving been named as registered agent and to accept service of process for the above stated corporation at the place aesignated in this certificate, thereby 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.

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