P96000098067 TRANSMITTAL LETTER

EFFECTIVE DATE 1-1-97

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

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| | (Proposed corpor | | FILED C -4 PH 3 FILED AMERICAN | | | |
|---|-----------------------------------|---------------------------------------|------------------------------------|--|--|--|
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate | □\$122.50 Filing Fee & Certified Copy | S131.25 Filing Fee, Certified Copy | | | |
| | | ADDITIONAL C | OPY REQUIRED 7 | | | |
| from: <u>Ken</u> 1450 | Neth REYNOLD Name (Printe | 22 | OPY REQUIRED PH 3: 1/5 | | | |
| NICEY, 1/E FL. 32578 City, State & Zip | | | | | | |
| | 904 - 1, 78 -081 Daytime Telep | • | ا تمرور الماتي | | | |

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

ne 12/4/96

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.

The name of the corporation shall be: REYNOLDS LANDS CAPING, Inc.

ARTICLE II PRINCIPAL OFFICE

SHARES ARTICLE III

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

INITIAL REGISTERED AGENT AND STREET ADDRESS
the initial registered agent is: MARY REYNOLDS

1450 25th 5th 422

NICEVILLE, FL.

32578 ARTICLE IV The name and address of the initial registered agent is:

| The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): |
|---|
| 1. KENNETH REYNOLDS (President) |
| 1450 25th St. #22 |
| . NICEVITIE, Fl. 32578 |
| · · · · · · · · · · · · · · · · · · · |
| 2. MARY REYNOLUS (Secretary) |
| 1450 25th st. #22 |
| NICEYITIE, Fl. 32578 |
| |
| ARTICLE VI |
| The effective date of this incorperation will be 1-1-97 |
| The effective dance of this |
| |
| The undersigned incorporator(s) has(have) executed these Articles of Incorporation this |
| 4th day of thacamber, 19 96. |
| |
| (An additional article must be added if an effective date is requested.) |
| Hu fynald |
| Signature |
| 1 100 - 1 20 - 1 1 1 2 |
| Signature Signature |
| |
| |

Notarization is not required

Signature

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: REYNOCDS (NNdSCARING, I | nc |
|--|----|
|--|----|

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

| MARY REYNOLDS | T.s | | |
|--|-------|---------|----|
| (NAME) | | 96 | |
| 1450 254 5+. #22 (P.O. Box of Mail Drop Box NOT ACCEPTABLE) | | DEC. | T |
| (P.O. Box of Mail Drop Box NOT ACCEPTABLE) | | 4- | |
| NICEVILLE FL. 32508 | OF ST | <u></u> | ED |
| (CITY/STATE/ZIP) | ATE | ω ⇔ | |
| | | (0 | |

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.

Mary Remolds 12-4-96 (DATE)