P97000089673

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

900002321599--0 -10/16/97--01029--013 *****78.75

SUBJECT: _	FATOLITIS & ROUSH, IN (Proposed compo	C . rate name - must include suf	Tix)	_
Enclosed is an or	riginal and one(1) copy of the article	s of incorporation and a c	check for :	
S70.0 Filing Fe	90 \$78.75	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
FRO	OM: John Roush Name (F	ADDITIONAL CO		BINISIC
	Tarpon Spring	Address		VISIC: 15 PH

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

Daytime Telephone number

(813) 942-7886

10-17-97 WS

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FATOLITS & ROUSH, INC. (QUALITY LANDSCAPE SYSTEMS)



ARTICLE II PRINCIPAL OFFICE

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

1214 East Lime Street Tarpon Springs, F1 34689

P.O. Box 546 Tarpon Spings, F1 34688

ARTICLE III SHARES

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

1,000.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

John Roush 1214 East Lime Street Tarpon Springs, FL 34689

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Michael Fatolitis

P.O. Box 546 Tarpon Springs, FL 34688

Michael Signature/Incorporator 10-7-97

Date

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

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

Signature/Registered Agent Date