PORCOCO TRANSMITTAL LETTER Department of State TRANSMITTAL LETTER Department of State

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

SUBJECT:	Comp	ou-landsca	DE DESIG	an Inc.
		Proposed corporate name -	must include suffix)	1 /

700002446827 -03/04/98--01065-006

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

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Christopher J. LAWSON
Name (Printed or typed)

6900 S.W. 5th street

Penbuoke Pines FlA. 33023
City, State & Zip

1-954-987-9961 Daytime Telephone number 98 MAR -4 PN 3: 16
SECRETALLAHASSEE, LORIDA

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

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:

Compu-Landscape Designs, Inc.



ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 6900 SW 5th Street, Pembroke Pines, Florida 33023

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Chris Lawson

6900 SW 5th Street, Pembroke Pines, Florida 33023

ARTICLE V INCORPORATOR

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

Steve Lawson

6900 SW 5th Street, Pembroke Pines, Florida 33023

Signature/Incorporator

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

Data