TRANSMITTAL LETTER

PAGODOOO

Department of State
Division of Corporations
P. O. Box 6327

Tallahassee, FL 32314

SUBJECT:

(Proposed corporate name - must include suffix)

2010002793652—
-03/03/99—01079—018
*******87.50 *******87.55

Enclosed is an original and one(1) copy of the articles of incorporation and a check for

FROM: Island Home Landscaping, Inc.

Name (Printed or typed)

1009 W. Baychore Trive

Address

St. George Island, Fl. 32328

City, State & Zip

Baychore Telephone number

Daytime Telephone number

□\$78.75

Filing Fee

& Certified Copy

\$70.00

Filing Fee

\$78.75 Filing Fee

& Certificate of Status

\$87.50

Filing Fee,

Status

Certified Copy

& Certificate of

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.

FILED

99 MAR -3 PM 3: 12

NAME The name of the corporation shall be:

ARTICLE I

Island Home Landscaping, Inc.	FLURIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:	=
1000 11 200 1	
ARTICLE III SHARES 32328	
The number of shares of stock that this corporation is authorized to have outstanding at any one time	is:
100 Shares	·
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the initial registered agent are:	; -
320 Patton St. St. George Ft. 32328	
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:	
George M. Wade	-
St. George Island, F.I.	• • •

(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