

P99000048782

TRANSMITTAL LETTER

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

SUBJECT: Michael B. Rambo DBA AM-PM LAWN SERVICE  
(Proposed corporate name - must include suffix)

200002821922--6  
-03/29/99--01101--020  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Michael B. Rambo  
Name (Printed or typed)

840 94<sup>th</sup> Ave. No.  
Address

NAPLES, FL 34108  
City, State & Zip

941-597-5324  
Daytime Telephone number

99 MAY 28 PM 12:48

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

W99-7891

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

SHARON

MAY 28 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 1, 1999

MICHAEL B. RAMBO  
840 94TH AVE NO.  
NAPLES, FL 34108

SUBJECT: MICHAEL B. RAMBO D/B/A AM-PM LAWN SERVICE  
Ref. Number: W99000007891

We have received your document for MICHAEL B. RAMBO D/B/A AM-PM LAWN SERVICE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Sharon Davis  
Document Specialist Supervisor

Letter Number: 999A00016677

May 19, 1999

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

Re: Letter number 999A00016677

Attn: Ms. Sharon Davis

Dear Ms. Davis,

Attached please find the revised application forms as requested.

You may reach me at the registered address and if you page me I will be happy to return your call. My pager number is (941) 890-6230.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael B. Rambo", written in a cursive style.

Michael B. Rambo

# 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:

Am-Pm LAWN SERVICE, INC.

## ARTICLE II PRINCIPAL OFFICE

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

840 94th Ave N.  
NAPLES, FL 34108

## ARTICLE III SHARES

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

500 SHARES

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Michael B. Rambo  
840 94th Ave No. , NAPLES, FL 34108

## ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Michael B. Rambo  
840 94th Ave No.  
NAPLES, FL 34108

  
Signature/Incorporator

5-25-89  
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

5-25-89  
Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 MAY 28 PM 12:48