P99801018/5

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

> 200003048372----9 4 4-11/18/33--01041--016 ******78.75 *****78.75

SUBJECT:

LEE'S IRRIGATION CORP.

(Proposed corporate name - must include suffix)

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

\$70.00 \$\times \$78.75\$

Filing Fee Filing Fee & Filing Fee, & Certificate of Status

\$Certificate of Status

\$ADDITIONAL COPY REQUIRED

FROM: ARTHUR LEE BROWN

Name (Printed or typed)

11940 SW 179 TERR.

Address

MIAMI, FL 33177

City, State & Zip

(786) 473-7887

Daytime Telephone number

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 L NAME

The name of the corporation shall be:

LEE'S IRRIGATION CORP.

ARTICLE II PRINCIPAL OFFICE

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

11940 SW 179 TERR., MIAMI, FL 33177 (786) 473-7887

ARTICLE III SHARES

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

ONE HUNDRED THOUSAND (100,000) AT NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ARTHUR LEE BROWN 11940 SW 179 TERR. MIAMI, FL 33177

ARTICLE V INCORPORATOR

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

ARTHUR LEE BROWN 11940 SW 179 TERR. MIAMI, FL 33177

Signature/Incorporator

(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