	Department of State Division of Corporati P. O. Box 6327 Tallahassee, FL 3231	GOOD II	TTAL LETTER SECTIVE DATE 1-1-00		FILED C -6 PM 5:53 ARY UF STATE SSEE, FLORIDA
SUBJECT: SHEPPARD'S LAWN CARE, INC. (Proposed corporate name - must include suffix)					
			8	:0000306; -12/06/99- *****87.51	2088—6 -01121012 0 ***** \$7.50
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 CO	PY REQUIRED	
	FROM:		PPA27> rinted or typed)		
			CDWOOD DRIV	18	
VAIRICO, FCA 33594 City, State & Zip					
813 - 662 - 7178 Daytime Telephone number					

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

1-1-00

ARTICLES OF INCORPORATION

99 DEC -6 PH 5:53 TALLAHASSEE FITATE

ARTICLE I

The name of the corporation shall be: Sheppard's Lawn Care, Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be: PO Box 565

Riverview, Fla 33568

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at ony one time is: 10,000,000 shares

Karen Sheppard - 148-60-1075 - 6,000,000. Fred Sheppard - 221-40-3828 - 2,500,000.

Mark Sheppard - 593-84-5713 - 250,000.

Robert Sheppard - 593-84-5714 - 250,000.

Outstanding Shares

1,000,000.

ARTICLE IV

The name and Florida street address of the initial registered agent are: Fred Sheppard
1036 Hardwood Drive
Valrico, Fl 33594

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are: Karen Sheppard
1036 Hardwood Drive
Valrico, Fl 33594

ARTICLE VI

The effective date of this Corporation is: 1/1/2000.

Signature/Incorporator

Date

Having been named as registerred agent and to accept service of process for the above stated corporation at the place designated in this certificate, I herby 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