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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN JAN 15 2004

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dream Lawn Turf & Landscape, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mark S. Keegan, Esq.

(Name of Person)

Keegan Law Firm, LLC

(Firm/Company)

233 N. Main St., Ste 7

(Address)

Greenville, SC 29601

(City/State and Zip code)

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For further information concerning this matter, please call:

Mark S. Keegan, Esq.

(Name of Person)

at ( 864 ) 233-3111

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St  
Tallahassee, FL 32399

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☒ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

**1. Dream Lawn Truf & Landscape, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

**Call to discuss**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. South Carolina**

(State or country under the law of which it is incorporated)

**3.**

57-1092219

(FEI number, if applicable)

**4. January 20, 2000**

(Date of incorporation)

**5.**

(Duration: Year corp. will cease to exist or "perpetual")

**6. Upon Qualification**

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification"  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

**7. 708 Brooks Rd., Mauldin, SC 29662**

(Principal office address)

**708 Brooks Rd., Mauldin, SC 29662**

(Current mailing address)

**8. To transact business in the state of Florida managing residential and commercial lawns.**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: Andrew G. Brockman

Office Address:

12633 Brady Place Blvd.

Jacksonville,  
(City)

Florida 32223  
(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

**11.** Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

**12. Names and business addresses of officers and/or directors:**

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**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**B. OFFICERS**

President: **Gregory D. Erockman**

Address: **708 Brooks Rd.**

**Mauldin, SC 29662**

Vice President: **Andrew G. Brockman & Jack Stout**

Address: **708 Brooks Rd.**

**Mauldin, SC 29662**

Secretary: **Andrew G. Brockman**

Address: **708 Brooks Rd., Mauldin, SC 29662**

Treasurer: **Jack Stout**

Address: **708 Brooks Rd., Mauldin, SC 29662**

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. ARB

(Signature of Director or Officer listed in number 12 of the application)

14. **Andrew G. Brockman- Vice President & Secretary**

(Typed or printed name and capacity of person signing application)

# The State of South Carolina



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TALLAHASSEE, FLORIDA

## Office of Secretary of State Mark Hammond Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

### ***DREAM LAWN TURF & LANDSCAPE, INC.,***

a corporation duly organized under the laws of the State of South Carolina on **January 20th, 2000**, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of  
the State of South Carolina this 4th day of  
December, 2003.

A handwritten signature in black ink that reads "Mark Hammond".

Mark Hammond, Secretary of State

NOTE: This Certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual report with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.