

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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04/27/20--01012--018 **87.5

05/13/20--01015--003 **900.00

T GLASS MAY 1 3 2020



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 30, 2020

BRADLEY HUFF P.O. BOX 1346 GREENSBORO, GA 30642 US

ERTILIZER COMPANY, document has not been

We have received your document for GREENE COUNTY FERTILIZER COMPANY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$900.00.

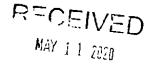
A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 920A00008937



COVER LETTER

_	tration Section for Corporations			
SUBJECT:	Greene County Fertilizer Compa			
	Name of c	corporation -	must include suffix	
Dear Sir or Ma	adam:			
"Certificate of	"Application by Foreign Corpo Existence," or "Certificate of ced foreign corporation to trans	Good Stand	ing" and check are submi	Business in Florida," tted to register the
Please return a	all correspondence concerning	this matter t	o the following:	
Bradley Huff				
		Name of Pe	erson	
Greene County Fertilizer Company, Inc.		F		
		Firm/Comp	any	
P.O. Box 1346				· ;
		Addres	s	
Greensboro, G/	\ 30642			<u>:</u>
	C	ity/State and	l Zip code	22
brad@greeneco	<u> </u>			
	E-mail address: (t	o be used for	r future annual report noti	fication)
For further info	formation concerning this matte	er, please cal	1:	
Bradley Huff	at (706) 410-2269 Daytime Telephor	
Name	of Person	Area Code	Daytime Telephor	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sect Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	check for the following amount eck payable to: FLORIDA DEPA ng Fee	RTMENT C	OF STATE 578.75 Filing Fee & E Certified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy

BUSINESS IN FLORIDA

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

Greene County	Fertilizer Company, Inc.		
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate nar	ne adopted for the purpose of transacting bus	iness in Florida)
2		3	
(State or countr	y under the law of which it is incorporated)	3(FEI number, if applicat	ble)
Georgia 4.		46-5136957	
(Date	of incorporation)	5. (Date of duration, if other than p	perpetual)
6. 3/25/14			
7. 7/2014 7. 1490 Airport Rd	(SEE SECTIONS 607.1501 & 607	s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability) office street address) 346 Greensboro, GA 30642	
8. Name and <u>stree</u> Name: Office Address:	(Current ma et address of Florida registered agent: (I Hunter Pignato 6306 Gibson Dr.	iling address, if different) P.O. Box NOT acceptable)	2028)
	Belle Isle	, Florida	d: ∪5
	(City)	(Zip code)	FO .

9. 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, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duand I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS			
□Chairman	Name: John D. Perry	□Chairman	Name: Bradley J Huff
□Vice Chairman	Address: 6270 Mountain View Dr.	□Vice Chairman	Address:
□Director	Park City, UT 84098	□Director	Watkinsville, GA 30677
■ President		□President	
□Vice President		■ Vice President	
■ Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	□Other	Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□ Secretary	□Treasurer
□Other		□Other	
⊒Chairman	Name:	□Chairman	Name:
⊒Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□ Director	
∃President		□President	
□Vice President	-	□Vice President	, N
☐Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	□Other	Other

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he can she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Bradley J Huff (Vice President / COO)

Control Number: 14029707

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

GREENE COUNTY FERTILIZER COMPANY, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

S

Docket Number : 19127041
Date Inc/Auth/Filed: 03/24/2014
Jurisdiction : Georgia
Print Date : 05/08/2020

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State