## F22-000001799

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	<del></del>
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T. LEMIEUX MAR 28 2022

## **COVER LETTER**

TO:	Registratio Division of	n Section f Corporations					
SHRI	Wet IECT:	Grass Inc.					
3000		N	ame of corpora	tion - mu	st include suffix		
Dear 9	Sir or Madam	1:					
"Certi	ficate of Exis		ficate of Good S	Standing'	and check are sub	ct Business in Florida," omitted to register the	
	return all co McRoberts	rrespondence con	cerning this ma	itter to the	e following:		
		<u> </u>	Name	of Perso	n		
Wet (	irass Inc.						
			Firm/C	Company			
2334	1st Ave N						
Saint	Petersburg, FL	. 33713	A	ddress	<del></del>		
haley	tylerf@gmail.c	com	City/Sta	te and Zij	o code		
		E-mail ad	dress: (to be us	ed for fut	ure annual report	notification)	
For fu	rther informa	tion concerning t	his matter, plea	se call:			
Haley Tyler 727			_	271-4776			
	Name of P	erson	at ( Area (		Davtime Telep	hone Number	
	Traine V/I I	CISON	/ iica c	Jode	Daytime Telep	none (vamoe)	
	Registration Division of The Centre 2415 N. Mo	COURIER ADD n Section Corporations of Tallahassee onroe Street, Suite, FL 32303			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	section orporations 7	
Please		for the following hyable to: FLORID			TATE 75 Filing Fee &	□ \$87.50 Filing Fee,	
470	noo i miig i c		cate of Status		tified Copy	Certificate of Status & Certified Copy	



February 16, 2022

SEAN MCROBERTS 2334 1 AVE N ST PETERSBURG, FL 33713

SUBJECT: WET GRASS INC. Ref. Number: W22000018864

We have received your document for WET GRASS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer 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) 245-6051.

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

Letter Number: 122A00003849

## 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. Wet Grass Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") FLOVIDA WEL GYAIS, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 36-4999433 State or country under the law of which it is incorporated)

36-4999433

(FEI number, if applicable) 09/15/2021 (Date of incorporation) N/A (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2334 1st Ave N, Saint Petersburg, FL 33713 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Massey Law Group, P.A.

3833 Central Avenue

St. Peters burg Florida 33713
(City) (Zip code) Office Address: 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated processing 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.

10. 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.

A. DIRECTORS	Gary Wheeler Name:  2334 1st Ave N  Address: Saint Petersburg, FL 33713	□Chairman □Vice Chairman □Director □President ■Vice President □Secretary	Name:23 Address: Saint Peter	k Wheeler  334 1st Ave N  sburg, FL 33713	
Other	□Other	Other		□Other	
□ Director □ President	Sean McRoberts  Name:  2334 1st Ave N  Address:  Saint Petersburg, FL 33713   Treasurer  Other	□ Vice President □ Secretary	Address:	□Treasurer	
□ Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□ Vice Chairman	Address:		
□Director		Director		<del></del>	
□President		□President			
□ Vice President		□ Vice President	<u> </u>		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer	
Other	Other	Other		Other	
The officer or dire she is aware that first s.817.155. F.S.	Use an attachment to report more than six (6). I hadded to the index when filing your Florida Designature of Discourse Signature of Discourse the Secretary (Typed or printed name and capacity)	rector or Officer number 11 above) affirms the Department of State constitution.	eport form.  hat the facts stutes a third de	ated herein are true and tha gree felony as provided for	at he o

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WET GRASS INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORFORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TENTH DAY OF NOVEMBER, A.D. 2021.

6237330 8300

SR# 20213746873

Authentication: 204648015

Date: 11-10-21