



THE UNITED STATES  
CORPORATION  
COMPANY

# F99000004198

ACCOUNT NO. : 072100000032

REFERENCE : 339847 7184638

AUTHORIZATION :

*Patricia Pizzuti*

COST LIMIT : \$ 70.00

ORDER DATE : August 12, 1999

ORDER TIME : 9:59 AM

ORDER NO. : 339847-010

500002959585--2

CUSTOMER NO: 7184638

CUSTOMER: Ms. Debbie E. Jones  
Turf Drains Inc  
39555 Orchard Hill Place  
Ste 600  
Novi, MI 48375

## FOREIGN FILINGS

NAME: TURF DRAIN, INC.

5

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 AUG 13 PM 3:41

*mr*

8/13/99

RECEIVED  
500002959585  
8/13/99

**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.

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1. Turf Drain, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Michigan  
(State or country under the law of which it is incorporated)
3. 38/3062491  
(FEI number, if applicable)
4. 8/3/92  
(Date of incorporation)
5. perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. no business done  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 39555 Orchard Hill Place, Suite 600, Novi, MI 48375  
(Current mailing address)
8. Golf Course Remodeling  
(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: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida, 32301  
(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.*

Corporation Service Company,  
By: Karen E. Wehner  
(Registered agent's signature)

Karen E. Wehner, Asst. VP

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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**Chairman: See attached officers/directors rider

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

Vice Chairman: See attached officers/directors rider

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

Director: see attached officers/directors rider

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

Director: See attached officers/directors rider

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

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**President: See attached officers/directors rider

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

Vice President: See attached officers/directors rider

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

Secretary: See attached officers/directors rider

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

Treasurer: See attached officers/directors rider

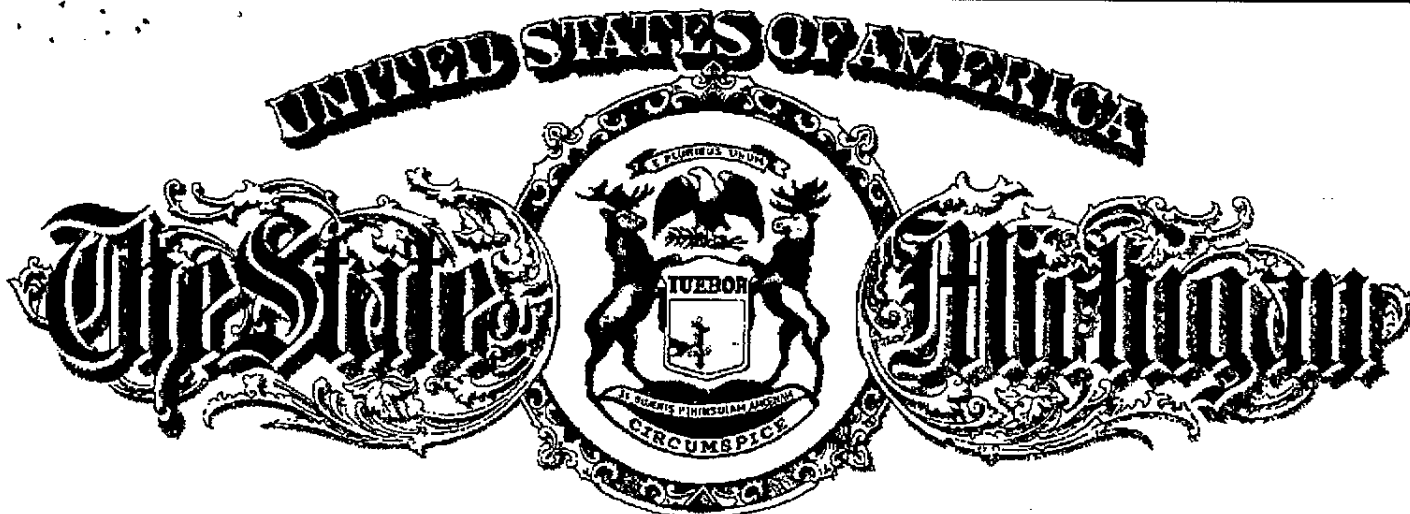
Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Geoff Corlett, President  
(Typed or printed name and capacity of person signing application)FILED  
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DIVISION OF CORPORATIONS  
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# **OFFICERS/ DIRECTORS RIDER**

NAME	ADDRESS	TITLE
Geoff Corlett	39555 Orchard Hill Place Suite 600, Novi, MI 48375	President
Susan Corlett	39555 Orchard Hill Place Suite 600, Novi, MI 48375	Vice-President
John C. Louisell	400 Renaissance Center Suite 1900, Detroit, MI 48243	Secretary

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Michigan Department of Consumer and Industry Services

Lansing, Michigan

*This is to Certify That*

**TURF DRAIN, INC.**

*was validly incorporated on August 3, 1992, as a Michigan profit corporation,  
and said corporation is validly in existence under the laws of this State.*

*This certificate is issued to attest to the fact that the corporation is in good standing  
in this office as of this date and is duly authorized to transact business or conduct  
affairs in Michigan and for no other purpose. It is in the usual form, made by me  
as the proper officer, and is entitled to have full faith and credit given it in every  
court and office within the United States.*

*In testimony whereof, I have hereunto set my  
hand and affixed the Seal of the Department,  
in the City of Lansing, this 29th day  
of June, 1999.*

*Julie Croll*

, Director

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