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SECRETARY OF STATE VLLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TURF EVOLUTIONS, LL	C I Liability Company)
. (Name of Emiliee	Liability Company)
The enclosed "Application by Foreign Limited Liabili Florida," Certificate of Existence, and check are subm liability company to transact business in Florida	ity Company for Authorization to Transact Business in nitted to register the above referenced foreign limited
Please return all correspondence concerning this matter	er to the following:
MARY B. GALARDI, ESC	Q. = ===
(Name	of Person)
MARY B. GALARDI, P.C	ASSO -
(Firm/	Company) Company) Company)
40 TECHNOLOGY PKW	لب نے ٰ
(Al	uuress)
NORCROSS, GA 30092	
(City/State	and Zip Code)
For further information concerning this matter, please	call:
MARY B. GALARD, ESQ.	at (770) 416-0033
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: S	TREET ADDRESS:
	Division of Corporations
	lifton Building
	661 Executive Center Circle allahassee, FL 32301
Enclosed is a check for the following amount:	☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certificate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

TURF EVOLUTIONS, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
GEORGIA 3
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. APRIL 6, 2006 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1595 PEACHTREE PKWY STE 204-366
CUMMING, GA 3004:1 (clipped by section of the control of the con
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here 🗹 💆 🛴 💟
9. The name and usual business addresses of the managing members or managers and as follows:
GREG ROSCOE
1595 PEACHTREE PKWY STE 204-366
CUMMING, GA 30041
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records: the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: SALES OF
ARTIFICIAL TURE
Shope C. Row
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) GREGROSCOE

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:		
TURF EVOLUTIONS, LLC		
10111 21 020110110, 220		-
If name unavailable, the alternate name to be used in the state of Florida is:		
	TALE ZO	
2. The name and the Florida street address of the registered agent and office at JOHN KNOX		てこれつ
(Name) 230 CANAL BLVD., STE 3 Florida Street Address (P.O. Box NOT ACCEPTABLE)	3: 42 STATE LORIDA	
PONTE VEDRA 32082 FL City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 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 as provided for in Chapter 608, Florida Statutes.

(Signature)

S 100.00 Filing Fee for Application

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Control No. 0628956

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

TURF EVOLUTIONS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 04/06/2006 in Georgia. 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 30th day of October, 2007

Karen C Handel Secretary of State

Laven C. Handel

Certification Number: 1804628-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp