

PLEASE READ ALL INSTRUCTIONS BEFORE CO

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 FEB 27 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO2000025059

1. Corporation Name

LAWN MASTERS MANAGEMENT, INC.

2. Principal Office Address

10671 S. 228th Lane

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton, Fla. 33428

City & State

Zip

Country

USA

Zip

Country

4. Date Incorporated or Qualified

To Do Business in Florida 3/5/2002

5. FEI Number

75-3012247

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

John Auricchio

Street Address (P.O. Box Number is Not Acceptable)

10671 S. 228th Lane

Suite, Apt. #, Etc.

City

Boca Raton, Florida 33428

State

FL

Zip Code

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

John Auricchio
REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	John Auricchio	10671 S. 228th Lane	Boca Raton, Fla. 33428

200030931902
03/26/04-01064-015 **150.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

John Auricchio
John Auricchio Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/03

Date

Daytime Phone #

2057

July 9, 2003

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
Tallahassee, Florida 32302-1500

~~REF: LAWN-MASTERS-MANAGEMENT, INC.~~

GENTLEMEN:

When I went to get a mortgage for a new home my lender told me that my corporation was inactive.

Although I have not moved I still never received the UBR Report for 2003. I am enclosing a Corporation Reinstatement Form with a check for \$150.00 as you office in Tallahassee told me to do when I called them.

I hope this will clear up the situation and I will keep closer check next year and make sure that I receive the UBR.

Sincerely

John Auricchio

P.S. I need to delete Jason Nunes from this corporation but could not find a place on the form to do so., can you do this for me.
Thank you.