

P04000150500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

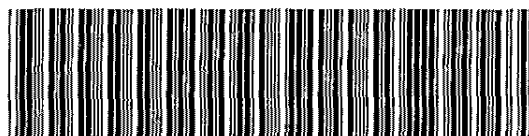
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400042257654

11/02/04--01045--008 **78.75

FILED
RECEIVED
04 NOV -2 AM 11:04
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
2004 NOV -2 P 2:25
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Charter Number Only

Euq 11/1/04

Requestor's Name

Address

City

State

ZIP

Phone

Atlantic

VALIDATION ONLY

CORPORATION(S) NAME

Peninsula Turf Inc.

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

WP Verifier



Empire Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I - NAME

The name of the corporation shall be:

PENINSULA TURF INC.

ARTICLE II - PRINCIPLE OFFICE:

The principle office of business and mailing address of this corporation shall be:

1031 N.E. 137 ST
NO. MIAMI FL 33161

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is:

LAWN CARE

ARTICLE IV - SHARES

100

ARTICLE V - INITIAL DIRECTORS / OFFICERS

The names and addresses:

ROBERT MACON - Pres. 1031 N.E. 137 ST. NO. MIAMI FL 33161

ARTICLE VI - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the registered agent is:

ROBERT MACON
1031 N.E. 137 ST NO MIAMI FL 33161

ARTICLE VII - INCORPORATOR

The name and address of the Incorporator is:

ROBERT MACON
1031 N.E. 137 ST NO. MIAMI FL 33161

Having been named as registered to accept service of process for the above state corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Robert Macon
Signature Registered Agent

11/1/04
Date

Robert Macon
Signature Incorporator

11/1/04
Date

FILED
2004 NOV - 2 P 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA