

P 06 000082825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

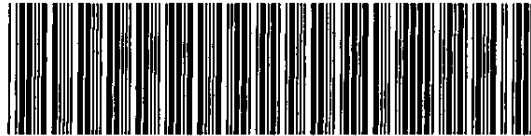
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/19/06--01018--005 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUN 19 AM 8:50

B. McKnight JUN 20 2006

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Turf Professor & Associates, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

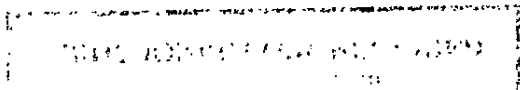
FROM: Craig S. Boller
Name (Printed or typed)

123 Clipper Bay Road
Address

Brunswick, GA 31523
City, State & Zip

(912) 261-1652
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



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:

Turf Professor & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

891 West American Eagle Drive
St. Augustine, FL 32092

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Irrigation & Landscaping Business

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Craig S. Boller -President
891 West American Eagle Drive
St. Augustine, FL 32092

Kelly M. Boller - Vice- President
891 West American Eagle Drive
St. Augustine, FL 32092

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Craig S. Boller
891 West American Eagle Drive
St. Augustine, FL 32092

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Craig S. Boller
891 West American Eagle Drive
St. Augustine, FL 32092

Having been named as registered agent to accept service of process for the above stated 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




Signature/Registered Agent

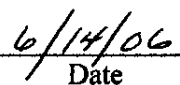


Signature/Incorporator

Craig S. Boller



Date



Date

FILED
SECRETARY OF STATE
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