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## **COVER LETTER**

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

SUBJECT: Augie's Turf Care Inc.	
(PROPOSED CORPO	RATE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the a	articles of incorporation and a check for:
☐ \$70.00	S78.75 S87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Brian Augustin	
Na	me (Printed or typed)
17915 SW 35th st	<u> </u>
· · · · · · · · · · · · · · · · · · ·	Address
Miramar, FL 33029	
C	ity, State & Zip
954-815-3820	
Daytin	ne 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:

Augie's Turf Care Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

17915 SW 35th st Miramar, FI 33029

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide aeration and other turf care maintenance for customers such as golf courses, municipalities, and school districts. The company will primarily act as an independent contractor to provide services utilizing NuGreen equipment and technology. 100

#### 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):

Brian Augustin 17915 SW 35th St Miramar, Ft. 33029 President

Kimberly Augustin 17915 SW 35th St Miramar, FI 33029 Vice President

#### ARTICLE VI REGISTERED AGENT

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

Brian Augustin 17915 SW 35th st Miramar, FL 33029

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brian Augustin 17915 SW 35th st Miramar, FL 33029

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

Signature/Registered Agent Date

Signature/Incorporator

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