

PD8000043457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

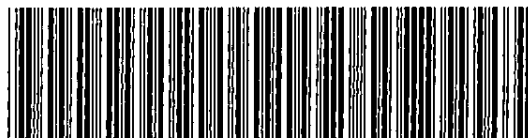
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400125246134

04/24/08--01025--002 **78.75

MRS
5/1

FILED
08 APR 30 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

108-20876

TRANSMITTAL LETTER

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

SUBJECT: Extreme Sod Services, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Stephen Daddio
Name (Printed or typed)

11376 Gyrafalcon Ave.
Address

Weeki Wachee FL 34613
City, State & Zip

(352) 592-5420
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2008

JOHN S CHIAROMONTE, JR.
11358 FURLEY AVE
WEEKI WACHEE, FL 34613

SUBJECT: EXTREME SOD SERVICES, INC.
Ref. Number: W08000020876

We have received your document for EXTREME SOD SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Only one registered agent is required.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 308A00024967

ARTICLES OF INCORPORATION

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

FILED

08 APR 30 PM 4:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Extreme Sod Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11358 Furley Ave.
Weeki Wachee, FL 34613

mailling: P.O. Box 5123
Spring Hill, FL 34611

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sod

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

John S. Chiaromonte Jr. 11358 Furley Ave. Weeki Wachee, FL 34613	Stephen Daddio 11376 Gyrafalcon Ave. Weeki Wachee, FL 34613
--	---

ARTICLE VI REGISTERED AGENT

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

John S. Chiaromonte Jr.
11358 Furley Ave.
Weeki Wachee, FL 34613

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stephen Daddio
11376 Gyrafalcon Ave.
Weeki Wachee, FL 34613

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



Signature/Registered Agent

4/28/08
Date



Signature/Incorporator

4/28/08
Date