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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

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

SUBJECT: SAW	GRASS MAHINDRA, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o
		ADDITIONAL CO	Status PPY REQUIRED
FROM: <u>F</u>	eter A. Portley, Esquire	(D. '	
	Nam	e (Printed or typed)	
2	211 East Sample Road, Suite 204		
	•	Address	
<u>Li</u>	ghthouse Point, FL 33064		
	City	, State & Zip	
95	54-781-7600		•
_	Daytime [*]	relephone number	
	\		
pr	ortley@portleysullivan.com	ed for future annual report i	notification)
	E-man address: (to be use	sa toi tutute annuai tebort i	nonneanon)

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:

SAWGRASS MAHINDRA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

14501 W. Sunrise Blvd. Sunrise, FL 33323

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Transacting any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1000 shares of common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

David Menten, Dir., Pres., Sec/Treas. 14501 W. Sunrise Blvd. Sunrise, FL 33323

14501 W. Sunrise Blvd. Sunrise, FL 33323

Alex Medina, V-p

ARTICLE VI REGISTERED AGENT

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

Peter A. Portley, Esq. 2211 East Sample Road, Suite 204 Lighthouse Point, FL 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Menten 14501 W. Sunrise Blvd. Sunrise, FL 33323

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/Incorporator