

P13000076515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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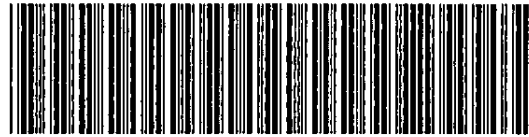
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 SEP 12 PM 2:48

14

COVER LETTER

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

SUBJECT: **Gator Grass & Nursery, 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

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: **Daniel M Conger**

Name (Printed or typed)

1216 Redcliffe Lane

Address

St. Augustine, Florida 32095

City, State & Zip

904-219-1139

Daytime Telephone number

mitchconger@gmail.com

E-mail address: (to be used for future annual report notification)

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: Gator Grass & Nursery, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6605 State Road 207

Elkton, Florida 32033

Mailing address, if different is:

1216 Redcliffe Lane

St. Augustine, Florida 32095

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Operate under IRA Rules under Sub Chapter S for a profit corporation.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Daniel M Conger, President

Address 1216 Redcliffe Lane

St Augustine, Florida 32095

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

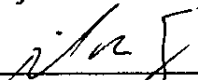
Name: Daniel M Conger
Address: 1216 Redcliffe Lane
St Augustine, Florida 32095

ARTICLE VII INCORPORATOR

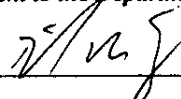
The name and address of the Incorporator is:

Name: Daniel M Conger
Address: 1216 Redcliffe Lane
St Augustine, Florida 32095

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

 09/05/13
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 09/05/13
Required Signature/Incorporator Date