

P130000097349

(Requestor's Name)

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(City/State/Zip/Phone #)

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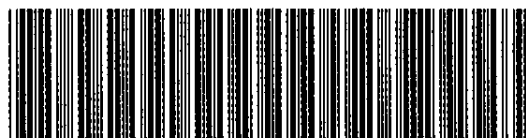
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 12/6

COVER LETTER

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

SUBJECT: GREEN PROCEDURES BIOLOGICALS 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: GREEN PROCEDURES BIOLOGICALS INC
Name (Printed or typed)

P.O. Box 1155
Address

CANTONMENT FL. 32533
City, State & Zip

850-969-0051
Daytime Telephone number

greenprocedures@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: GREEN PROCEDURES BIOLOGICALS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2629 S. Hwy 29
CANTONMENT, FL. 32533

Mailing address, if different is:

PO Box 1155
CANTONMENT, FL. 32533

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The marketing/selling of Biological agriculture Products
to other Turf Care Professionals in the Green Industry.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steve R. Black President

Address: 476 McKenzie Rd
CANTONMENT FL. 32533

Name and Title: Shelley D. Black V. President

Address: 476 McKenzie Rd
CANTONMENT FL. 32533

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(cont.)

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: Steve R. Black
Address: 476 McKenzie Rd.
Cantonment FL 32533

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shelley D. Black
Address: 476 McKenzie Rd
Cantonment FL 32533

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

Required Signature/Registered Agent

12/2/2013
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.

Required Signature/Incorporator

12/2/2013
Date