P16000057740

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

Conception

B Todock SEP 1 4 2016

COVER LETTER

| TO: Amendment Section Division of Corporations | | | |
|--|--|--|--|
| SUBJECT: NU-TURF | , INC | | |
| DOCUMENT NUMBER: <u>P16000057740</u> | | | |
| The enclosed Articles of Correction and fee are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | |
| GRAHAM HEYWOOD Name of Contact Person | > | | |
| Firm/Company | | | |
| 6203 W. SUNRISE BLVD | | | |
| SUNRISE FL. 33313 City/State and Zip Code | | | |
| 9 raham & Southern - greens. Com E-mail address: (to be used for future annual report notification) | | | |
| For further information concerning this matter, please call: | | | |
| GRAHAM HEYWOD at (754) 581-5844 Name of Contact Person Area Code & Daytime Telephone Number | | | |
| Enclosed is a check for the following amount: | | | |
| \$35.00 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | | |
| □ \$43.75 Filing Fee & Certified Copy | □ \$52.50 Filing Fee, Certificate of Status & Certified Copy | | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | |

ARTICLES OF CORRECTION

For

NU-TURF, INC

| Name of Corporation as currently filed with the Florida Dept. of State | | |
|--|----------|----------|
| P16000057740 Document Number (if known) | | |
| Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected. | 3 | |
| These articles of correction correct OFFILER DIRECTOR ADDRESS (Document Type Being Corrected) | ¥ω | |
| filed with the Department of State on (File Date of Document) | ECHE | 16 SEP |
| Specify the inaccuracy, incorrect statement, or defect: | ARY C | ₩ .1 |
| OFFICER DIRECTOR ADDRESS | 17 S | <u>₹</u> |
| CURRENTLY 11351 NW 25th STREET | | _ 8; 53 |
| PLANTATION, FL. 33323 | ~ | ω |
| GRAHAM HEYWOOD | _ | |
| Correct the inaccuracy, incorrect statement, or defect: | | |
| OFFICER OIRECTOR ADDRESS | | |
| 6203 W. SUNRISE BLVD | _ | |
| SUNRISE, FL. 33313 | | |
| GRAHAM HEYWOOD | | |
| | _ | |
| (Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.) | | |
| G. S. HEYWOOD President | | |

Filing Fee: \$35.00