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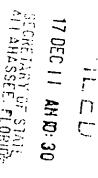
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## **COVER LETTER**

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

SUBJECT:	ETIC GRASS FLORIDA, INC.		
SUBJECT:	(PROPOSED CORPOR)	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	I a check for:
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	
FROM:	E FINANCIAL PLAZA, 100 SE 3R		
		Address	
FOI	RT LAUDERDALE, FL 33394		
	City	. State & Zip	
954	.848.3111		
	Daytime '	Felephone number	
anda	rew@jimenezlawoffices.com		
	E-mail address: (to be use	d for future annual report i	notification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 624, F.S. (Profit)

<u> 21K F IU. LE TOUR 1849 F I</u>	Synthetic Grass Florida, I	nc.	
the name of the corpora	Synthetic Grass Florida, I ation shall be:		
<u>ARTICLE II PRIN</u>	<u>CIPAL OFFICE</u>		
700 NIC M/	Principal <u>street</u> address	Cambari.	Mailing address, if different is: Grass Florida
280 NE Wavecrest Wa Boca Raton, FL 33432			ul. Industriel
noca Raon, FL 33432		1-1000 (N	
		St-Eusta	che, QC J7R 5V3
ARTICLE III PURP	OSE the corporation is organized is:		
	of Symbetic Grass, and all and any lawf		
	and any law i	odsiness operations.	·
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			SS:
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			19 19 19 19 19 19 19 19 19 19 19 19 19 1
ARTICLE IV SHAR The number of shares o			
ARTICLE V INITE	AL OFFICERS AND/OR DIRECTORS	e e	
	**	_	Karl Gignac, Commercial Director
Name and Titl	Jean-Pierre Thomas, President e:	Name and Tith	
Address	1-500 boul, Industriel	Address: 1-500 boul, Indust	1-500 boul, Industriel
	St-Eustache, QC J7R 5V3		St-Eustache, QC 17R 5V3
Name and Title	×	Name and Title	·
Address		A.Idea.	
Mudress		Address.	
		<del></del>	
Name and Title	·	Name and Title	·
<b>V J</b> I		• 1.0. · · ·	
Address		Address:	
		-	

Name	and Title:	Name and Title:	
Addre	ess	Address:	
			<del></del>
			<del></del>
	REGISTERED AGENT Florida street address (P.O. Box NOT accepta	ole) of the registered agent is:	
Name:	Jimenez Law Offices , P , A ,		
	100 SE 3rd Avenue, Suite 1514		
Address:	Fort Lauderdale, FL 33394	<del></del>	
	Port Lauderdale, PL 33394	<del></del>	
BTICLE VII	INCORDAD 4 TOD		
	<u>INCORPORATOR</u>		
ne <u>name and</u>	address of the Incorporator is:		
Name:	Karl Gignac	<del></del>	
Address:	1-500 boul. Industriel		
	St-Eustache, QC J7R 5V3		
		<del></del>	
RTICLE VIII	I EFFECTIVE DATE:		
fective date.	it other than the date of filing:	OPTIONAL)	dove after the
ing.)	date is listed, the date must be specific and o	innot be giore than live days prior of so	, days after the
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e document's	effective date on the Department of State's reco	rds.	
	amed as registered agent to accept service of p	and the shows stated componentials at 1	the place designated in
aving been n is certificate,	amea as registered agent to accept service of the Inner the appointment	y registered agent and agree to act in this	capacity
	16X (1) H	12/01	/2017
	Required Signature Registered Agen	$\rightarrow$	Date
cubmit this d	ocument and affirm Illat theffacts stated herein	are true. I am aware that the fulse info	mation submitted in a
ocument to th	e Department of State constitutes a third degree	felons as provided for in s.817.155, F.S.	()
	Mittellan		comber 900
Reg	puied Signature/Incorporator		Dute )