# P22000003606

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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Office Use Only



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2022 JAN 18 PH 12: 12

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2022 JAN 18 PH 3: 12 SECRETARY OF STATE TALLAHASSEE, FL

FILED

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## **CORPORATE** ACCESS, \_\_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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X	X FILING	INC	-		<del></del> ·			
1.	TURF SERVICES INC							
	(CORPORATE NAME AND DOCUMEN	T #)						
2.								
	(CORPORATE NAME AND DOCUMEN	IT #)			•••			
3.					<u> </u>			
	(CORPORATE NAME AND DOCUMEN	T #)						
4.	(CORPORATE NAME AND DOCUMEN	T #1	· · · ·					
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5.	(CORPORATE NAME AND DOCUMEN	T #)	·			··		
6.								
	(CORPORATE NAME AND DOCUMEN	T #)				·-		
SPECI INSTR	AL UCTIONS:							

### **COVER LETTER**

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

TURF SERVICES INC

SUBJECT:	. OLIVICES INC							
	(PROPOSED CORPORA	TENAME - MUSTINGE	UDE SUFFIX)					
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation and	d a check for:					
∟ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	<ul><li>≦ S87.50</li><li>Filing Fee.</li><li>Certified Copy</li><li>&amp; Certificate o</li><li>Status</li></ul>					
		ADDITIONAL CO	PY REQUIRED					
FROM: _	DENISE MORRILL Name	(Printed or typed)						
	725 N MAGNOLIA AVE							
	Ä	ddress						
	ORLANDO FL 32803							
	City, S	State & Zip						
<u>-</u>	386-222-9668							
	Daytime Telephone number							
_	denise@liquorlicenseprofessional.com							
	E-mail address: (to be used	for future annual report no	etification)					

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

## FILED

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I N.AME 2022 JAN 18 PM 3: 12 The name of the corporation shalf be: TURF SERVICES INC SECRETARY OF STATE ARTICLE II PRINCIPAL OFFICE Mailing address, if different is AHASSEE, FL 18919 BELVEDERE RD Principal street address ORLANDO FL 32820 ORLANDO FL 32820 ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY & ALL LEGAL BUSINESS ARTICLE IV SHARES 100 The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS NELSON J JEWETT JR PRESIDENT Name and Title: Name and Title: KAITLYN JEWETT VICE PRESIDENT 18919 BELVEDERE RD Address 18919 BELVEDERE RD Address: ORLANDO FL 32820 ORLANDO FL 32803 Name and Title: \_\_\_\_\_\_\_Name and Title: \_\_\_\_\_\_\_ Address Address: Name and Title: Name and Title: Address Address:

Name and Title:		Name and Title:				
Addre						
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT accept	otable) of the registered agent is:				
Name:	KAITLYN JEWETT	•				
Address:	18919 BELVEDERE RD	 .s. <b>~2</b>				
	ORLANDO FL 32820	2022 J Secr Tal				
ARTICLE VII	INCORPORATOR	PAN 18 PH 3: 12 CRETARY OF STAT ALLAHASSEE, FL				
The name and a	ddress of the Incorporator is:					
Name:	NELSON J JEWETT JR	E, F,				
Address:	18919 BELVEDERE RD	ATE ATE				
	ORLANDO FL 32820					
Effective date, if (If an effective of filing.)  Note: If the date		d cannot be more than five days prior or 90 days after the				
Having been nam certificate, I am f	ned us registered agent to accept service of pr amiliar with and accept the appointment as	rocess for the above stated corporation at the place designated in this registered agent and agree to act in this capacity				
Satt	Required Signature/Registered Age	01/14/2022				
[] I submit this doc		Lane				
document to the 1	Department of State constitutes a third degre	ein are true. I am aware that the false information submitted in a very efelony as provided for in s.817.155, F.S.				
Required Signatu	relificações de la frança de la	001/14/2022				