Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000757983)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

FOREIGN PROFIT/NONPROFIT CORPORATION LELY TURF INC.

Certificate of Status	0
Certified Copy	0
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COVER LETTER

	tration Section ion of Corporations			
SUBJECT:	Lely Turf Inc.			
SOMECT.	Nam	ne of corporation - mus	st include suffix	
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign f Existence," or "Certificated foreign corporation to	ate of Good Standing"	and check are submit	business in Florida," ted to register the
Please return	all correspondence conce	rning this matter to the	e following:	
Chris Lang				
		Name of Perso	n	
Lely Turf Inc.				
		Firm/Company		
315 South Str	cet			
Address			~	
Pella, IA 50219		·.		
		City/State and Zi	p code	
Clang@lely.c	om	·		•
	E-mail add	ress: (to be used for fu	ture annual report not	ification)
	iformation concerning thi	is matter please call:		
For further it	normation concerning un	is matter, prease carr.		٠٠٠
Chris Lang		641 6	29-9781 Daytime Telepho	;
Nan	ne of Person	at (641) 641	Daytime Telepho	ne Number
Regi Divi The 2415	EET/COURIER ADDR stration Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite ahassee, FL 32303		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassec, FL	tion porations
Enclosed is a Please make o	n check for the following theck payable to: FLORID, fling Fee	A DEPARTMENT OF Filing Fee &	STATE 8.75 Filing Fee & entified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Lely Turf Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Delaware (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) 1/01/2021 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 315 South Street, Pella, IA 50219 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Corporation Service Company

(Registered agent's signature)

^{10.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

⊒Chairman	Name: Eduard Meijer	□Chairman :	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address: 315 South St Pella, IA 50219	
≡ Director	Pella, IA 50219	⊜ Director		
□President		□President		
IlVice President		ElVice President		
☐Secretary	☐ Treasurer	☐ Secretary	[]Treasurer	
Other		□Other	Other	
□Chairman	Peter Langebeeke	(I) Chairman	Chris Lang	
	315 South St	□Vice Chairman	Address:	
Director	Pella, IA 50219	Director	Pella, IA 50219	
■ President		□President		
□ Vice President		☐ Vice President		
Secretary	□Treasurer	■ Secretary	Treasurer	
□Other	Other	Other	□Other	
(Date to as	Mike Connell	□ Chairman	Name:	
Chairman	Name: 315 South St Address:		Address:	
□Vice Chairman	Address:Pella, IA 50219	Director		
Director		□ President		
President		□Vice President		
■ Vice President	□Treasurer	Secretary	□Treasurer	
Secretary	□Other		□Other	
Important Notice individuals may b	Use an attachment to report more than six (6). To added to the index when filing your Florida De	he attachment will be image epartment of State Annual Re- rector or Officer	ed for reporting purposes only. Non-indexed eport form.	

s.817.155, F.S.

Chris Lang, Secretary/Treasurer



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LELY TURF INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LELY TURF INC."

WAS INCORPORATED ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

:

Authentication: 202579467

Date: 02-23-21