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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

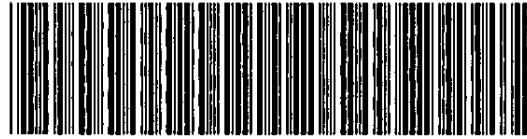
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
13 MAR 11 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL 32399

T. Burch MAR 12 2013



GENERATIONAL COMMERCIAL PROPERTIES CO.

18832 Crosswind Ave N Fort Myers, FL 33917

VOICE 239-271-7670

E-MAIL LLAMAS@AIRRIS.COM

March 1, 2013

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

SUBJECT: GENERATIONAL COMMERCIAL PROPERTIES CO.
(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 covering the Filing Fee

FROM:

Name **JOSEPH LLAMAS**

Address **18832 CROSSWIND AVE**

City, State & Zip **N FORT MYERS, FL 33917**

Daytime Telephone number **239-271-7670**

E-mail address: (to be used for future annual report notification)

LLAMAS@AIRRIS.COM

NOTE: The original and one copy of the articles are attached.

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: **GENERATIONAL COMMERCIAL PROPERTIES CO.**

ARTICLE II PRINCIPAL OFFICE

Principal Street address

Mailing address, if different is:

**18832 CROSSWIND AVE
N FORT MYERS, FL 33917**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Real estate and land development investments**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Janet Llamas President**

Name and Title: **Joseph Llamas Secretary**

Address: **18832 Crosswind Ave
N Fort Myers, FL 33917**

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N Fort Myers, FL 33917**

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **Joseph Llamas**
Address: **18832 Crosswind Ave
N Fort Myers, FL 33917**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Janet Llamas**
Address: **18832 Crosswind Ave
N Fort Myers, FL 33917**

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

MARCH 1, 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

MARCH 1, 2013

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA