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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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01/26/12--01033--007 **87.50

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: GREDEN BUILDERS, INC.
Name of corporation - must include suffix
Dear Sir or Madam:
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
DENNIS CJABS Name of Person GREDEN BUILDERS, Inc. Firm/Company
Name of Person
GREDEN BUILDERS, Inc
Firm/Company
Firm/Company Z5134 CRANES ROST CIRCLE Address LEGS BURG: Florida 34748 City/State and Zip code
Address
LEGS BURG, FloRIDA 34748
City/State and Zip code
PALISADE @ CITUNK NET E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.73 Filing Fee & Certified Copy Certificate of Status & Certified Copy





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SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATE FLORIDA **Division of Corporations**

January 27, 2012

DENNIS C JABS GREDEN BUILDERS, INC. 25134 CRANES ROOST CIRCLE LEESBURG, FL 34748

SUBJECT: GREDEN BUILDERS, INC.

Ref. Number: W12000005164

We have received your document for GREDEN BUILDERS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of incorporation listed in number four of your form must match the date listed on the certificate of goodstanding from your state.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II

2-10-2017 CX

Letter Number: 312A00002490

www.sunbiz.org

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Principal office address) 25134 GRANES ROOST CINCLE - LEESBURG FELA - 3 (Current mailing address) CERTIFIED BUILDING CONTRACTOR GENERAL (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: DENNIS IABS Office Address: 25134 GRANES ROOST CINCLE LEESBURG , Florida 34748 (City) (City) Registered agent's acceptance: Taving been named as registered agent and to accept service of process for the above stated corporation at the place	1,	GREDEN BUILDERS, FNC.
(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable) (PEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Principal office address) (Current mailing address) (Current mailing address) (Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) (Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Dewyls IABS Office Address: Z5134 Graves Rost Cincle (City) (City) (City) (Cip code) (FII number, if applicable) (Purpose (s) of incorporation exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (Correct or Cincle - Lets Burk is Flands or Cincle - Lets Burk		
(State or country under the law of which it is incorporated) (FEI number, if applicable) (FEI number,		(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
(State or country under the law of which it is incorporated) (FEI number, if applicable) (FEI number,	2.	NORTH DAKOTA 3 45-0416250
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Principal office address) (Current mailing address) (Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) (Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: DEWIS JABS Office Address: 25/34 GRANGS ROST CINCLE (City) (City) (City) (City) (Duration: Year corp. will cease to exist or "perpetual") (SHE SECTIONS (07.1501 & 607.1502, F.S., to determine penalty liability) (Priorida in Florida in Fl	•	
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Name: DENNIS TABS Office Address: Z5134 GRANES ROBST CINCLE LEESBURE , Florida 34748 (City) (Zip code) O. Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the place		(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
Office Address: 28/34 GRANGS ROOST CINCLE LEGSBURG , Florida 34748 (City) (Zip code) O. Registered agent's acceptance: Taving been named as registered agent and to accept service of process for the above stated corporation at the place	١.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Office Address: 28134 GRANGS ROOST CINCLE LEGSBURG , Florida 34748 (City) (Zip code) 0. Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the place		Name: DENNIS JABS
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Iaving been named as registered agent and to accept service of process for the above stated corporation at the plac		LEESBURG, Florida 34748
Iaving been named as registered agent and to accept service of process for the above stated corporation at the plac		(City) (Zip code)
esignated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity		iving been named as registered agent and to accept service of process for the above stated corporation5tt the place signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity.
urther agree to comply with the provisions of all statutes relative to the proper and complete performance of my di	W	rther agree to comply with the provisions of all statutes relative to the proper and complete performance of my du
and I am familiar with and accept the obligations of my position as registered agent.		d I am familiar with and accept the obligations of my position as registered agent.

11. 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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:	E-11 mm
A. DIRECTORS	FILED
Chairman: SAME AS OFFICE	1258 13 AM 11:41
Address:	SECRETARY DE STATE
	ALLAHASSEE. FLORIDA
Address:	
Directors	
Director:	
Address:	PR 12
Director:	
Address:	THE BUT
	70 =
B. OFFICERS	温温 三
President: DENNIS CTABS	>>
Address: 25/34 CRANES ROOST CIRCLE LEES BURG, FLA 34748	
LEES BURG, FLA 34748	
Vice President:	
Address:	
Secretary: JACQUELUN S. MASON-JABS	
Address: 25/34 CRANES ROOST CIRCLE	HEESBURG FLA
Address: 25/34 CRANES ROOST CIRCLE, Treasurer: N/A	34745
Address:	
NOTE: If necessary, you may attach an adderdaum to the application listing additional officers	and/or directors.
13. Signature of Director or Officer	•
The officer or director signing this document (and who is listed in number 12 above) affirms the are true and that he or she is aware that false information submitted in a document to the Depart	
third degree felony as provided for in s.817.155, F.S.	ment of state constitutes a
14. DENNIS C JABS	····
(Typed or printed name and capacity of person signing application)	

State of North Dakota SECRETARY OF STATE





CERTIFICATE OF GOOD STANDING OF

GREDEN BUILDERS, INC.

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that GREDEN BUILDERS, INC., a North Dakota BUSINESS CORPORATION, was incorporated in this office on March 28, 1990 and, according to the records of this office as of this date, has paid all fees due this office as required by North Dakota statutes governing a North Dakota BUSINESS CORPORATION.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing to

GREDEN BUILDERS, INC.

Issued: January 20, 2012

Alvin A. Jaeger Secretary of State

Alvin a Jarger