F17000005070

(Requestor	's Name)
(Address)	<u> </u>
(Address)	
(City/State	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	t Number)
Certified CopiesC	Certificates of Status
Special Instructions to Filing C	Officer:
87.50	
<u> </u>	

Office Use Only



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COVER LETTER

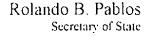
TO: Registration Secti Division of Corpo			
SUBJECT: G.	D. VenturesIII	nc.	
SUBJECT: O.	Name of corporation	on - must include suffix	
D C Madami			
Dear Sir or Madam:			
"Certificate of Existence,	n by Foreign Corporation for "Certificate of Good St corporation to transact busi	or Authorization to Transact anding" and check are subm ness in Florida.	Business in Florida, itted to register the
Please return all correspo	ndence concerning this mat	ter to the following:	
	Gerald Pockin	U.S.	
	Name (of Person	
	G.D. Ventures	IIInc.	
	Firm/Co	ompany	
	P.O. Box 72	dress	
	Olmito Texa	15 78575 e and Zip code	
	•		
	Nird gen 2000 (E-mail address: (to be use	g Jahoo - 10 m ed for future annual report no	otification)
For further information of	concerning this matter, pleas	se call:	
0. 11 5		U_) 455 - 044	8
Name of Person		Code Daytime Teleph	one Number
STREET/COU	RIER ADDRESS:	MAILING AL	
Registration Sec	ction	Registration Se Division of Co	ection morations
Division of Cor		P.O. Box 6327	
Clifton Building 2661 Executive Tallahassee, FL	Center Circle	Tallahassee, Fl	
Enclosed is a check for	the following amount:		
☐ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Enter name of co	poration; must include "INCOR rp," "Inc," "Co," or "Corp.")	PORATED," "	COMPANY," "CORPORATION,"		-
(If name unavailal	ble in Florida, enter alternate corp	porate name ado	pted for the purpose of transacting b	usiness in Florida	-
Tex	as	3	74-2994604		
(State or country	under the law of which it is inco	rporated)	74-2994604 (FEI number, if applie	cable)	
4. Marc	h 20,2001	5.			
(Date	of incorporation)		(Date of duration, if other tha	in perpetual)	
5.	Novembe	15,2	017		
	(Date first transacto	d business in Fl	orida, if prior to registration)		_
00.55	_	_	F.S., to determine penalty liability)		
7. 2315	Bayer Ct	Control of the Contro	sville TX 78	296	
	<u> </u>	(emicipari	office addressy	-,	
		Surrent mailies a	iddress, if different)		:7
	(, , , , , , , , , , , , , , , , , , , ,		. KO;
8. Name and street	address of Florida registered	agent: (P.O. I	Box NOT acceptable)		- .
	•	-		• • • • • • • • • • • • • • • • • • • •	ေ
Name:	Grant Erickson	<u>'</u>		, ,	-
Office Address:	1100 Shrimp Bo	nat Ln		36.	्रि ====================================
	Fort Oulers	Bello	Warida 23.931	<u> चिंग</u>	S S
	(City)	MUCH	, Florida <u>33931</u> (Zip code)	•	
9. Registered age Having been name	ut's acceptance:	accept service	of process for the above stated o	corporation at th	ie place
designated in this	application. I hereby accept t	he appointme	nt as registered agent and agree	to act in this cu	pacity. I
further agree to co	emply with the provisions of a smiller with and accept the o	ill statutes rela blivations of n	utive to the proper and complete ny position as registered agent.	performance of	my
aunes, and rum j	initial with und accept you	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, pro		
	O V				
	_ March	(Registered age		- 	

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. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Gerald Pockrus Address: P.D. Box 729 Olmito, TX 78575 Vice Chairman: Address: Director: __ Address: B. OFFICERS President: Gerald Pockrus Address: P.O. Box 729 Olmito, TX 78575 Vice President: Treasurer: _____ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. Gerald Pockrus Chairman President
(Typed or printed name and capacity of person signing application)





Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for G. D. VENTURES II, INC. (file number 161976600), a Domestic For-Profit Corporation, was filed in this office on March 20, 2001.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 10, 2017.



Phone: (512) 463-5555

Prepared by: SOS-WEB

R

Rolando B. Pablos Secretary of State

(512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 772898770010