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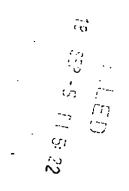
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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COVER LETTER

TO:	D: Registration Section Division of Corporations								
	C	•	A DEVELOPME	NT CORPO	RAT	ION			
SUBJ	ECT:		Name	of corporat	ion -	must include suffix			
D C	Sir or Mad	l .		•					
Dears	or iviad	iam:							
"Certi	ficate of E	Existence		c of Good S	Stand	ling" and check are sub	ct Business in Florida." mitted to register the		
Please	return all	corresp	ondence concerr	ing this ma	tter	to the following:			
JAME	S F. GRAY	MATA							
				Name	of P	erson			
GRAN	JATA DEV	VELOPN	IENT CORPORA	TION					
				Firm/C	omp	any			
301 H	ARBOUR	PLACE	DR #614						
				Ac	ldres	S			
TAMI	PA, FL 330	502							
				City/Stat	e an	d Zip code			
jimgra 	m@gmail.	com		· · · · ·					
			E-mail addres	s: (to be us	ed fo	r future annual report i	notification)		
For fu	rther info	rmation	concerning this r	natter, plea	se ca	III:			
JAMES F. GRAMATA 773			773		315-6103				
	Name of Person Area			at (Area (Code	Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations						MAILING ADDRESS: Registration Section Division of Corporations			
Clifton Building 2661 Executive Center Circle						P.O. Box 6327 Tallahassee, FL 32314			
	Tallaha					rananassee, t	L 32314		
Enclos	sed is a ch	eck for	the following am	ount:					
\$ \$7	0.00 Filing	g Fee	□ \$78.75 Filit Certificate			\$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

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.

GRAMATA DE	GRAMATA DEVELOPMENT CORPORATION									
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY." "CORPORATIO	N,"							
(If name unavaila	able in Florida, enter alternate corporate name a	adopted for the purpose of transacti	ing business in Florida)							
ILLINOIS	3.	36-4329462								
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)								
(Date	of incorporation) 5.	(Date of duration, if other than perpetual)								
_ 301 HARBOUR	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 PLACE DR #614, TAMPA, FL 33602	Florida, if prior to registration) 602, F.S., to determine penalty liabi	dity)							
	(Principal office address)									
		ng address, if different)	S - 5							
8. Name and <u>street</u> Name:	et address of Florida registered agent: (P.C JAMES F. GRAMATA). Box <u>NOT</u> acceptable)	100 m							
Office Address:	301 HARBOUR PLACE DR #614		22							
		33602 , Florida								
	(City)	(Zip code)								

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.

(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. Names and business addresses of officers and/or directors: A. DIRECTORS JAMES F. GRAMATA Chairman: 301 HARBOUR PLACE DR #614 Address: TAMPA, FL 33602 ا رئي Vice Chairman: Address: _____ Address: ___ Address: ____ **B. OFFICERS** JAMES F. GRAMATA President: 301 HARBOUR PLACE DR #614 Address: **TAMPA, FL 33602** Address: Secretary: Address: Treasurer: 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 \$.817.155, F.S. JAMES E GRAMATA 13.

(Typed or printed name and capacity of person signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

GRAMATA DEVELOPMENT CORPORATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 21, 1999, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 15TH day of AUGUST A.D. 2019.

Authentication #: 1922701674 verifiable until 08/15/2020
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE