F21000005580

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	_	
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SEP 3 0 2021 M. SOLOMON

COVER LETTER

TO:	Registration Section Division of Corporations		_	
SUBJ	ፓ ረጥ,	Grady Grove	, Inc.	
SUDJ	EC1:	Name of corporation -	must include suffix	
Dear S	ir or Madam:			
"Certif	closed "Application by Forcate of Existence," or "Coreferenced foreign corporations."	ertificate of Good Standi	ng" and check are submit	tusiness in Florida." ted to register the
Please	return all correspondence	concerning this matter to	the following:	
		Brendan V. (orch,	
	· ··-	Name of Pe	erson	
		Grade Gra	sup Inc.	
	<u> </u>			
		106 VAKLE	1 AVE # 200	
		Address	3	
		Pineville NC	27/34 Zip code	
	, . <u></u>	City/State and	l Zip code	
	Ŀ	rendan @ grady	greepine Com Tuture annual report noti	
	E-mai	l address: (to be used for	future annual report noti	fication)
For fu	rther information concerni	ng this matter, please cal	1:	
	Meson Crain	704	776-633	7
	Megan Crain	Area Code	Daytime Telephon	e Number
	STREET/COURIER A Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street. Tallahassee, FL 32303	e	MAILING ADD Registration Sect Division of Corpe P.O. Box 6327 Tallahassee, FL	ion orations
Please		RIDA DEPARTMENT C .75 Filing Fee &	OF STATE \$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.

1	Crady Group I Corporation: must include "INCORPORATED." "CO	-nC.	_
(Enter name of "Inc.," "Co" "	`corporation; must include "INCORPORATED," "CC Corp." "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION,"	
	The Grady Group :	Incorporated	
			3)
Mec	Medica County North Carolina 3	80-0304441	
(State or coun	try under the law of which it is incorporated)	(FEI number, if applicable)	
.	5.		_
(Dat	te of incorporation) 5.	(Date of duration, if other than perpetual)	
),		μ/μ	
	(Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, F	•	
. 10	Olo Cakley Ave # 200 Pinev. 1 (Principal office str	le, NC 28134	
	(Principal office str	reet address)	
	(Current mailing add	ress, if different)	~:
		: 	[2]
	eet address of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	<u>X</u>
Name:	Henry R. Ingre- 110 East Brownd Blud.		00:11:05
Office Address:	110 East Brown Blod.	· · · · · · · · · · · · · · · · · · ·	
	Fort Lunderdale FL.	. Florida 33301	7 TO
	(City)	(Zip code)	

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.

_				
□Chairman	Name: Bredan V. Traly	□Chairman	Nume:	
□Vice Chairman	Address: 106 Oskle- Aver# 200	□Vice Chairman		
□ Director	Pineville, NC 28131	□Director		
President		□President		
		□Vice President		
Secretary	□Treasurer	□Secretary	<u> </u>	Treasurer
□Other	Other	Other		Other
□Chai m nan	Name: Hanry Ing. co	□ Chairman	Name:	
	Address: 110 East Broward Blvd,	□ Vice Chairman	Address:	_
□Director	Suite 1700	□Director		
President	Fort Lauderdale, FL 33301	□President		
Vice President		□ Vice President		
☐ Secretary	□Treasurer	☐ Secretary		Treasurer
Other	□Other	□Other		Other
]Chairman	Name:	□ Chairman	Name:	2021 \$
∃Vice Chairman	Address:	□Vice Chairman	Address:	יין פיין פיין פיין פיין פיין פיין פיין פ
Director		□Director		12. W
President		□President		351 =
Vice President		□Vice President		00
1 Secretary	□Treasurer	☐ Secretary	<u> </u>	Freasurer
□Other	Other	Other		Other



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

GRADY GROUP INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 22nd day of October, 2008, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official scal at the City of Raleigh, this 28th day of September, 2021.

Secretary of State

Elane I Marshall



September 21, 2021

BRENDAN V. GRADY GRADY GROUP INC. 106 OAKLEY AVE #200 PINEVILLE, NC 28134

SUBJECT: GRADY GROUP INC. Ref. Number: W21000127307

We have received your document for GRADY GROUP INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

No address listed fro "Henry Ingier" and title "sales" is not acceptable.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Rockazi

Letter Number: 621A00022813