Division of Corporations

Page 1 of 1



Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : MASTRIANA & CHRISTIANSEN, P.A.

Account Number: 119990000141
Phone: (954)566-1234
Fax Number: (954)566-1592

FLORIDA PROFIT CORPORATION OR P.A.

G & G Trust Corp.

Certificate of Status	1
Certified Copy	
Page Count	01
Estimated Charge	\$87.50

DIVISION OF CORPORATIONS

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SENT	BY:	MASTRIANA	AND	CHRISTIANSEN	PA;	954 56	4 022	2 ;	JUN-	19-00	5:1	8;	PAGE	2/4
	ARTICLES OF INCORPORATION								(((H00000032543 1)))					
	The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.													
	<u>AR</u>	TICLE I	N	AME						-				

Signature/Registered Agent

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
515 Seabreeze Boulevard

Ft. Lauderdale, Florida 33316

The name of the corporation shall be:

G & G Trust Corp.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 shares at \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:	NUL 00	SECRET WISION O
F. Ronald Mastriana Mastriana & Christiansen, P.A. 1500 N. Federal Highway, Ste. 200, Ft. Lauderdale, Florida 33304 'ARTICLE V INCORPORATOR	20 AM 10:	RY OF STA
The name and address of the incorporator to these Articles of Incorporation are: F. Ronald Mastriana Mastriana & Christiansen, P.A. 1500 N. Federall Highway, Ste. 200 Fort Lauderdafe, Florida 3330A	20	SHOIL LE
Signature/Incorporator 6-19-00 Date		

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of pr	rocess for the above stated corporation at the place designated in
this certificate, I hereby accept the appointment as registered agent the provisions of all statutes relating to the proper and complete p	performance of my duties, and I am familiar with and accept the
obligations of my position as registered agent	
(.K 12 () II (# W/N (C)) / M (/)	7 10 00

Date

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