## PCCCCCCT1639

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	and K Adva	nced, Inc. proprate name - must includ	e suffix)	
			<b>7000</b> 33 -07/24/ ******	/0001084007
Enclosed is an original	and one(1) copy of the articles	s of incorporation and a c	check for :	-
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO.	PY REQUIRED	
FROM:	G and K Ad	Vanced, Indinted or typed)	<u> </u>	r oo
Name (Printed or typed)  Name (Printed or typed)  Address  Name (Printed or typed)  Part Control of typed)  Name (Printed or typed)				
	Tovernier, Flority, S	Orida 3307 State & Zip	0	OF STATE RPORATIONS
	(305) 852-7. Daytime Te	732 lephone number	<u> </u>	

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

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The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

G and K Advanced, Inc.

PRINCIPAL OFFICE

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

273 Hibiscus Street Tavernier, Florida 33070

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shores

<u>ART</u>ICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Kenneth Gentes 273 Hibiscus Street Tavernier, Florida 33070 .

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Kenneth Gentes 273 Hibiscus Street Tavernier, Florida 33070

Signature/Incorporator

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

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agents

Signature/Registered Agent

*IL*20/00