



TRANSMITTAL LETTER

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

**Glennar Group Inc**

SUBJECT: \_\_\_\_\_  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

**Glenn R. Clark**

FROM: \_\_\_\_\_  
Name (Printed or typed)

**PO Box 550128**

\_\_\_\_\_  
Address

**Ft Lauderdale, FL 33355-0128**

\_\_\_\_\_  
City, State & Zip

**954-424-0470**

\_\_\_\_\_  
Daytime Telephone number

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

