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TRANSMITTAL LETTER

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

SUBJECT:	Gradiz	, Inc.	-		
SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	•				
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	a check for:		
□ \$70.00	\$78.75	□ \$78.75	1 \$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of		
			Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	Gradiz, Inc. Name (Printed or typed)				
	Timbe (Timor of Oppos)				
	4509 Wolferine Way				
	P	Address			
	Orlando	F1 3X	802		
	City,	State & Zip			
	257	176 - 1 PM			
	301-0 Daytime T	978 - 680	•		

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	- Times	
ARTICLE I NAME The name of the corporation shall be:	·	
	÷ ·	
Gradiz, Inc.	-	
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:	· · · · ·	
4809 Wolverine way Orlando F1 32801		
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:		
Drywall & Flooring		
ARTICLE IV SHARES	~~~	
The number of shares of stock is:	2 A A A	
500	· 新 田 田 田	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	8-9	
List name(s), address(es) and specific title(s):	4 E	
Jorge Gradiz, President 4509 Wolverine Way Orlando Fl. 32802	M 12: 51	-
ARTICLE VI REGISTERED AGENT		
The <u>name and Florida street address</u> of the registered agent is:		
David Castillo - Alliance Insurance	• •	
575 No. Semoran Blud Orlando, Fl. 32807		
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:		
Forgre Gradiz	·	
4509 Wolverine Way		
Forge Gradiz 4509 Wolverine Way Orlando FT. 32802		
<i>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</i>	********	
Having been named as registered agent to accept service of process for the above stated corp certificate, I am familiar with and accept the appointment as registered agent and agree to act it		is
Daw Cedelle	1/12/04	
Signaturo Registered Agent	Date	
	1 1	

Signature/Incorporator