05000/56576

(Re	equestor's Name)	
(Ad	dress)	
	ldress)	
(rid	41033)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
	siness Entity Nan	ne)
(54	omood Emay ream	107
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
		
Special Instructions to	Filing Officer:	
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11/28/05 - Units - Odd **87.50

COVER LETTER

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

SUBJECT:	Clase Gri	O LOMPAN ATE NAME - MEST INCL	V
	(PROPOSED CORPO)	ATE NAME – <u>MØST INCL</u>	VDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	a check for:
\$70.00 Filing Fee	learned '	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Noriko M. Name	Floyd (Printed or typed)	
	20945 N.E.3	3 yn ct. Address	-ti-sta-ta-ta-ta-ta-ta-ta-ta-ta-ta-ta-ta-ta-t
	Aventuro, Fl	. 33180 , State & Zip	
	305 - 213 - 04	163 Telephone number	· · · · · · · · · · · · · · · · · · ·

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FIL	
ARTICLE I NAME	SECRETARY TALLAMASS	
The name of the corporation shall be:		
Close Grip Company	05 KOV 22	AM 10: 09
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 20945 NE 3 Aventura, Fl	74 ct.	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: To Create and Provide products for Heal Athletic enhancement,		and
ARTICLE IV SHARES The number of shares of stock is: 100 \$ 1.00 A Share		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Aloriko M. Floyd Helen Panagos - Floyd		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the register NOTIKO M. Floyd JO945 N.E 37th ct. AVENTURA, FL. 33180 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: NOTIKO M. Floyd JO945 N.E 37th Ct. AVENTURA, FL. 33180	ed agent is:	
Having been named as registered agent to accept service of process for the above stated corpor certificate, I am familiar with and accept the appointment as registered agent and agree to act in	ration at the place do this capacity	signated in this
	8-13-0	75
Signature/Registered Agent	8-13-0 Date 8-13-0	
	8-13-0	5
Signature/Incorporator	Date	