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SECRETARY OF STATE
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C.S.1-19

COVER LETTER

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

SUBJECT:	Gendal Associates, Inc
	(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	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87,50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: David Gendal Name (Printed or typed)	
18669 Long Lake Drive	e ddress	
Boca Raton, FL	State & Zip	
561 488-4174	elenhoue number	

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

LARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Gendal Associates, Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

18669 Long Lake Drive Boca Raton, FL. 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting Work

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

David Gendal 18669 Long Lake Drive Boca Raton, FL 33496 President & Secretary

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

David Gendal 18669 Long Lake Drive Boca Raton, FL 33496

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Gendal 18669 Long Lake Drive Boca Raton, FL 33496

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator

Signature/Registered Agent