# P09000071116

(Requestor's Name)	
(Address)	
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PICK-UP WAIT MAIL	
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SECRETARY OF STATE

EP 8/25/09

# **COVER LETTER**

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

SUBJECT:	Gold R Us, Inc.				
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l 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 o Status		
		ADDITIONAL COPY REQUIR			
FROM:		A. Moore, Esq. e (Printed or typed)	·····		
		Byron Ave.			
		Address			
		e, Fla. 33154			
	City	, State & Zip			
		53437374			
	Daytime T	Celephone number			
		ayev@yahoo.com			
	E-mail address: (to be use	ed for future annual report	notification)		

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)

#### ARTICLE I NAME

The name of the corporation shall be:

Gold R Us, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 3015 NW 79th St., # F-98 Miami, Florida 33147

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to transact any and all lawful business.

#### ARTICLE IV SHARES

The number of shares of stock is:

7500 shares at \$.01 par.

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Masaniel Elishayev, President and Director, 3200 Collins Ave., #105, M.B. Fla. 33140

### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Masaniel Elishayev, 3200 Collins Ave., #105, M.B., Fla. 33140

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Masaniel Elishayev, 3200 Collins Ave., #105, M.B., Fla. 33140.

**************************************	*******
Having been named as registered agent to accept service of process for the ab place designated in this certificate, I am familiar with and accept the appoint agree to act in this capacity	<u>-</u>
Signature/Registered Agent   MASANTER Elishagev	8/13/09 Date
Signature/Incorporator .	8   13   0 9 Date

