

P100000028872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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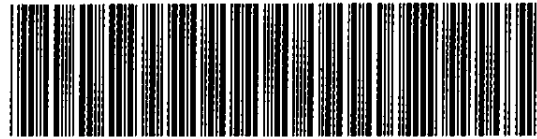
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10 APR -1 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301



4-2-10 CS

## COVER LETTER

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

**SUBJECT:** GH Resources International 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	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
<b>ADDITIONAL COPY REQUIRED</b>	

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

\_\_\_\_\_

105 Raphael Place  
\_\_\_\_\_

Address

\_\_\_\_\_

Nokomis , Florida 34275  
\_\_\_\_\_

City, State & Zip

\_\_\_\_\_

941-966-3487  
\_\_\_\_\_

Daytime Telephone number

\_\_\_\_\_

greghaering@comcast.net  
\_\_\_\_\_

E-mail address: (to be used 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:

GH Resources International Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

105 Raphael Place Nokomis ,Florida 34275

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Marketing and Decorating

### **ARTICLE IV SHARES**

The number of shares of stock is:

1000

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Greg Haering      105 Raphael Place      President  
Nokomis ,Florida  
34275

### **ARTICLE VI REGISTERED AGENT**

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

Greg Haering      105 Raphael Place Nokomis ,Florida 34275

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Greg Haering      105 Raphael Place Nokomis ,Florida 34275

\*\*\*\*\*

*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*

Greg Haering  
Signature/Registered Agent

3/29/2010

Date

Greg Haering  
Signature/Incorporator

3/29/2010

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA