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COVER LETTER

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

SUBJECT: G. Atz Inc.		
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE</u>	SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a cl	heck for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL COPY	REQUIRED
FROM: Gregory Scott Atz Name	(Printed or typed)	
498 NE 47 Street		
A	Address	
Boca Raton, FL 33431 City,	State & Zip	
954-803-3538 Daytime T	elephone number	
n/a E-mail address: (to be used	l for future annual report notif	ication)

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 The name of the corporate	AME G. Atz Inc.		
498	RINCIPAL OFFICE Principal street address NE 47 Street ca Raton, FL 33431	Mail	ing address, if different is:
	IRPOSE th the corporation is organized is: arketing of Investments.		
	of stock is: 50 Shares		
Name and Title Address:	STATES AND	Name and Title: Address:	
Name and Title Address:		Address:	
Name and Title Address:		Name and Title: Address:	
ADTICI E W DI	EGISTERED AGENT		BUG I
	a street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name: Address:	Gregory Scott Atz 498 NE 47 Street Boca Raton, EL 33431	- -	PH 1
ARTICLE VII IN	ICORPORATOR		·
	ss of the Incorporator is:		ಎ ಕ್ಯ
Name: Address:	Gregory Scott Atz 498 NE 47 Street Boca Raton, FL 33431	- - -	
	as rogistered agent to accept service of process amiliar with and accept the appointment as regi		
\mathcal{A})		08/05/2011
	Required Signature/Registered Agent		Date
I submit this docume document to the Depa	nt and affirm that the facts stated herein are rtment of State constitutes a third degree felony	true. I am aware that as provided for in s.81	the false information submitted in a 17.155, F.S.

Date

Required Signature/Incorporator