## P11000097774

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
,				

Office Use Only



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11/10/11--01022--028 \*\*78.75

SECHETARY OF STATE

## **COVER LETTER**

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

SUBJECT: GREEN DESTINATION CHALLENGE, INC.			
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )		
Enclosed are an original and one (1) copy of the art	icles of incorporation and a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75  Filing Fee  & Certified Copy  Certificate of  Status  ADDITIONAL COPY REQUIRED		
•			
FROM: KATHY MCGU Name			
104 DOE TRAIL Address			
JUPITER, FL 33458 City, State & Zip			
City, State & Zip			
5761.748.6	750		
Daytime Telephone number			
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 sh	nall be: GREEN DESTINATIO	ON CHALLENGE, IN	· ·
ARTICLE II PRINCIP	AL OFFICE	• .	
	ipal street address	Mailing add	ress, if different is:
	DE TRAIL	······································	ess, if different is.
JUPI	TER, FL 33458		
ARTICLE III PURPOSI The purpose for which the con	_		
	E SUSTAINABLE DU	SINES PRACTICE	55 .
ARTICLE IV SHARES The number of shares of stock			TALLAHA TALLAHA TALLAHA
ARTICLE V INITIAL	OFFICERS AND/OR DIRECTOR	<u>RS</u>	See In The See
Name and Title:	THY S. MCGUIRE, ARC	S Name and Title:	
	1 DOE TRAIL	Address:	
	PITEL, FL 33458	<del></del>	<u> </u>
		<del></del>	
Name and Title:	LIJAN MCGIJJEG V D.	Name and Title:	⊅~ " <b>ø</b> n
Address:	LLIBM MCGUIRE, V.P. BDX 11222	Address	
Pon	DAND BEACH, FL 3300		
	The Sensen, TE 330.		
Name and Title:			
Address:		Address:	
		_	
ARTICLE VI REGISTE	ERED AGENT		
	address (P.O. Box NOT acceptable) o	of the registered agent is:	
	THY S. MCGUIRE	if the registered agent is.	
	04 DOE THAIL	<del>_</del>	
	UPITER, FL 33458	_	
		_	
ARTICLE VII INCORPO			
The <u>name and address</u> of the l	Incorporator is:	•	
Name: 9	ATHY S. Nº GUIRE 04 DOE TRAIL UPITER, FL 33458	_	
Address:	24 DOE TRAIL	<del>,   </del>	
_~_	OP116K, PZ 33438	<del>_</del>	
this certificate, I am familiar w	ered agent to accept service of proces with and accept the appointment as reg	gistered agent and agree to act i	in this canacity
- talky .	J W Sure- quired Signature/Registered Agent		///8/// Date
Rec	juired Signature/Registered Agent	<del></del>	Date
I submit this document and a	ffirm that the facts stated herein are f State constitutes g third degree felon	e true. I am aware that the fal	se information submitted in a
1/.//	12/11/1		1.1.
- gathy &	1 M Zuie	····	
/ R	equired Signature/Incorporator		Date