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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
SHRED THE GNAR, INC.

Certificate of Status	0
Certified Copy	1
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Prepared by:
Adelaida A. Albareda, Esq.
Albareda & Associates, P.A.
330 SW 27 Avenue, Suite 202
Miami, Florida 33135
(786) 879-7823

ARTICLES OF INCORPORATION
OF
SHRED THE GNAR, INC.

The undersigned Incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 and/or Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I
Name

The name of this corporation shall be: **SHRED THE GNAR, INC.**

ARTICLE II
Duration

This corporation shall commence existence upon the date of filing with the Division of Corporations, State of Florida, and shall have perpetual existence.

ARTICLE III
Principal Office

The principal place of business of this corporation is 612 Commodore Drive, Plantation, Florida 33325.

ARTICLE IV
Purpose

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V
Shares

The aggregate number of shares which this corporation shall have authority to issue is One Hundred (100) shares of common stock.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

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ARTICLE VI

Initial Officers and/or Directors

The initial Officers and/or Director of the corporation shall be:

President, Secretary and Treasurer: Michael Egea
612 Commodore Drive
Plantation, Florida 33325

ARTICLE VII

Registered Agent

The name and street address of the initial Registered Agent of this corporation shall be:
Adelaida A. Albareda, Esq., ALBAREDA & ASSOCIATES, P.A., 330 SW 27 Avenue, Suite 202,
Miami, Florida 33135.

ARTICLE VIII

Incorporator

The name and address of the subscriber of these Articles of Incorporation is:

Michael Egea
612 Commodore Drive
Plantation, Florida 33325

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.



Required Signature/Registered Agent

1/5/12

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §.817.155, F.S.


Required Signature/Incorporator

1/06/12
Date

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