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COVER LETTER

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

SUBJECT: Skorude Corp.
(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 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: David Skorude
Name (Printed or typed)
935 Lois Ln.
Address
Titusville FL 32780
City, State & Zip
321-225-1038
Daytime Telephone number
DJ Skorude @ Yahoo . Com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: Skorude Corp.

12 MAY 14 PM 2:17

Titusville Fl. 32780

Mailing address, if different is: **SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

The purpose for which the corporation is organized is: *To make money*

The number of shares of stock is: 100

Name and Title: David Skorude Pres.
Address: 935 Lois Ln.
Titusville Fl. 32780

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name: David Skordie
Address: 935 Lois Cr.
Titusville Fl. 32780

Name: David Skoryde
Address: 935 Lois Ln.
Titusville Fl. 32780

David Skovsted

Required Signature/Registered Agent

May 14-2012
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 s.817.155, F.S.

David Skerwin

Required Signature/Incorporator

May 14 - 2012
Date