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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

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SECRETARY OF STATE
TALL AHASSEE FIGURE

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COVER LETTER

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

SUBJECT: Grayzone Media Cor	p.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	PY REQUIRED
FROM: Marcos Lapciuc Name 15800 NW 48th Av	(Printed or typed)	
	Address	=
Miami Gardens, F	L, 33014 State & Zip	
305-592 4500		
·	elephone number	
jordanag@precision E-mail address: (to be used	I 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)

name of the corpora	ME Grayzone Mediation shall be: Grayzone Media			· - · · · · · · · · · · · · · · · · · ·		
TICLE II PR	INCIPAL OFFICE Principal street address		Mailina addr	ess, if different	ier	
SAUN NIVA	48 Avenue		waning addi-		. 13,	
		<u> </u>		产供	_ _	
ami Gard	ens, FL, 33014	 	<u></u>	> 3.	<u> </u>	
				S. S.	16	1
	PROCE			An-	PH	-
purpose for which	the corporation is organized is: To enga	ge in all ph	ases of r	nercantile	5 N	_
sinesses	and media			ORID	09	
						
						_
						_
				•		
FICLE IV SH	ARES 1000 shares at \$1.00 par value		-			
number of shares o	f stock is: TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>				
number of shares o	f stock is:	<u>s</u> _ Name and Title	:			
number of shares o FICLE V INI Name and Tit	f stock is: TIAL OFFICERS AND/OR DIRECTOR		:		-1	
number of shares o	rstock is: TIAL OFFICERS AND/OR DIRECTOR Beginner of the state of th	Name and Title	:			
number of shares o FICLE V INI Name and Tit	TIAL OFFICERS AND/OR DIRECTOR e: Marcos Lapciuc, Director 15800 NW 48 Avenue	Name and Title	:			-
Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR e: Marcos Lapciuc, Director 15800 NW 48 Avenue Miami Gardens, FL, 33014	Name and Title Address:				
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTOR e: Marcos Lapciuc, Director 15800 NW 48 Avenue Miami Gardens, FL, 33014	Name and Title Address: Name and Title	:			
Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR Beautiful Marcos Lapciuc, Director 15800 NW 48 Avenue Miami Gardens, FL, 33014	Name and Title Address: Name and Title Address:	:			
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTOR e: Marcos Lapciuc, Director 15800 NW 48 Avenue Miami Gardens, FL, 33014	Name and Title Address: Name and Title Address:	:			
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTOR Beautiful Marcos Lapciuc, Director 15800 NW 48 Avenue Miami Gardens, FL, 33014	Name and Title Address: Name and Title Address:	:			
Name and Title Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Beautiful Marcos Lapciuc, Director 15800 NW 48 Avenue Miami Gardens, FL, 33014	Name and Title Address: Name and Title Address:				
Name and Title Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Be Marcos Lapciuc, Director 15800 NW 48 Avenue Miami Gardens, FL, 33014	Name and Title Address: Name and Title Address: Name and Title				

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and FI Name: Address:	REGISTERED AGENT Orida street address (P.O. Box NOT acceptable) of Marcos Lapciuc 15800 NW 48 Avenue	EP OF
ARTICLE VII	Miami Gardens FL. 33014 INCORPORATOR	PM 2: 09 SEE. FLORIDA
The name and ad	Idress of the Incorporator is:	
Name:	Marcos Lapciuc	
Address:	15800 NW 48 Avenue	
	Miami Gardens, FL, 33014	•
Having been nan this certificate, I d	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
	Required Signature/Registered Agent	
	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	rae. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
	Required Signature/Incorporator	9/13/13 Date/