PH000039497

(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

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

SUBJECT: 3 D	Innovations Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	8	ADDITIONAL CO	T REQUIRED
FROM: M	lichael P. McGrad	(Printed or typed)	
20	0619 Carousel Ci	rcle West	
	A	Address	
В	oca Raton, Florid	a 33434-393	0
	City,	State & Zip	
56	61-245-1396		
-	Daytime To	elephone number	
me	cgrady_m@bellsout	h.net	
	E-mail address: (to be used	i for future annual report i	nouncation)

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 NAM The name of the corporat	E 3D Innovations Inc	; .	T
ARTICLE II PRII	NCIPAL OFFICE Principal street address		ss, if differentis:
Boca Raton,F			M 3: 53
ARTICLE III PUR The purpose for which the	POSE ne corporation is organized is:	elopment,manufacture and sal	es of 3 D display systems
	Stock is: 1000	-	
Name and Title	Michael P. McGrady President	Name and Title:	
Address	20619 Carousel Circle West Boca Raton, Florida 33434-3930	Address:	
Name and Title:		Name and Title:	
Address			
Name and Title:		Name and Title:	
Address		Address:	

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI		
Name:	orida street address (P.O. Box NOT acceptable) of Michael p. McGrady	the registered agent is:
Address:	20619 Carousel Circle West	~ ·
	Boca Raton,Florida 33434-3930	
ARTICLE VII	INCORPORATOR	HAR 31
The name and ad	dress of the Incorporator is:	SE RELEASE
Name:	Michael P. McGrady	FSTATE FLORE
Address:	20619 Carousel West	TE W
	Boca Raton, Florida 33434-3930	- -
Having been nam this certificate, I a	ned as registered agent to accept service of process im familiar with and accept the appointment as regi	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
Attackout	XI MY	03/28/2014
7,022	Required Signature/Registered Agent	Date
I submit this doct	iment and affirm that the facts stated herein are to Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a
111	ARU ()	03/28/2014
Required Signature Incorporator		Date