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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

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

SUBJECT: Grace R	esidential Building Corporation		
SUBJECT.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate o Status
	ADDITIONAL COPY		PY REQUIRED
FROM:	uglas Milano Nam 5 NW 25TH Ave	e (Printed or typed)	
		Address	
Cap	c Coral, FL 33993		
_	City	, State & Zip	····
	Daytime T	Telephone number	
	E-mail address: (to be use	ed for future annual report	notification)

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

March 9th, 2016

Registration Section

Division of Corporations

P.O. BOX 6327

Tallahassee, FL 32314

RE: Grace Residential Building Corporation

Dear Department,

It has come to my attention that the annual report for Grace Residential Building Corporation has not been filed timely and therefore my corporation has been administratively dissolved.

At this time I would like for the department to release this document number P04000132937 FOR Grace Residential Building Corporation. I am the President of this Corporation and am authorized to release this document number.

I am also enclosing articles that I would request the department to file for me at this time.

Thanking you in advance for your help in getting these matters resolved.

Sincerely,

Doŭglas Milano

Grace Residential Building Corporation.

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

ARTICLE I NAME The name of the corpora		lding Corporation	16 HAD II
ARTICLE II PRINC		•	16 HAR 14 PM 1:35 Mailing address, if different isf STATE ASSEE FLORIDA
1005 NW 25th Avenue			- Contigu
Cape Coral, FL 33993			
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is:	and All Lawful Business	·
	· · · · · · · · · · · · · · · · · · ·		
ARTICLE IV SHARD The number of shares of ARTICLE V INITIA Name and Title	stock is: AL OFFICERS AND/OR DIRECTO	ORS Name and Title	Rose Milano VP
Address	1005 NW 25th Avenue	Address:	1005 NW 25th Avenue
Address	Cape Coral, FL 33993	Address.	Cape Coral, FL 33993
Name and Title		Name and Title	
Address		Address:	
Name and Title		Name and Title	n:
Address			

Name a	and Title:	Name and Title:		
Addre	ss	Address:		
ARTICLE VI	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acce	otable) of the registered agent is:	16 HAR 14 SEVALAHASS	
Name:	Douglas Milano	habite, of the registered agent in	MAR 14	
	1005 NW 25th Ave		PH	
Address:	Cape Coral, FL 33993		PH 1: 36	
ARTICLE VII	INCORPORATOR	P	£**	
The <u>name and</u>	address of the Incorporator is:			
Name:	Douglas Milano			
Address:	1005 NW 25th Ave			
	Cape Coral, FL 33993			
<u>ARTICLE VIII</u>	<u>EFFECTIVE DATE:</u>			
Effective date, i (If an effective	f other than the date of filing: date is listed, the date must be specific ar	(OPTIONAL)	s davs prior or 90 busines	
days after the	•		s days prior or so washies	
	te inserted in this block does not meet the ap effective date on the Department of State's		, this date will not be listed	
	amed as registered agent to accept service of the description of the d			
			03/09/2016	
	Required Signature/Registered A	gent	Date	
	ocument and affirm that the facts stated he Department of State constitutes a third deg			
+			03/09/2016	
	uffed Signature/Incorporator	.	Date	

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