9/1/2016

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION GWEN ALLYN TAYLOR-GRAYSON, PA

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Electronic Filing Menu

Corporate Filing Menu

Help

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

name of the corpo	NCTPAL OFFICE				
Principal <u>street</u> address			Mailing address, if different is:		
09 Marler Ave					
ami, FL 33133					
TICLE III PUR	POSE Realtor the corporation is organized is:			•	
		•		<u>, , , , , , , , , , , , , , , , , , , </u>	
					
					
•••					
•					-
TICLE IV SHA	of stock is:				
number of shares	TAL OFFICERS AND/OR DIRECTORS				
number of shares	of stock is:	Name and Title:_			
number of shares	TAL OFFICERS AND/OR DIRECTORS				
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Name and Title:		Name and Title:		
Addres		Address:		
ARTICLE VI The name and E Name: Address:	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable Gwen Allyn Taylor-Grayson 3509 Marler Ave	e) of the registered agent is:		
ARTICLE VII	Miami, FL 33133 INCORPORATOR			
The name and a	ddress of the Incorporator is:			
Name:	Gwen Allyn Taylor-Grayson			
Address:	3509 Marler Ave	_		
Address.	Miami, FL 33133	_		
Effective date, if (If an effective of days after the fi Note: If the day	iling,)	. (OPTIONAL) mnot be more than five business days prior or 90 business able statutory filing requirements, this date will not be listed as ds.		
Having been nat this certificate, I	med as registered agent to accept service of prod am familiar with and accept the appointment as	cess for the above stated corporation at the place designated is s registered agent and agree to act in this capacity		
	Gwen Atlyn Taylor Grayson	8/31/2016		
	Guen Allyn Taylor Grayson Required Signature/Registered Agent	Date		
I submit this document to the		are true. I am aware that the false information submitted in t		
	Goven Allyn Taylor Graycon	8/31/2016		
Requ	ired Signature/Incorporator	Date		