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(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
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ECRETARY OF STATE:

2 09/06/16

Poncho's Die Shop 9010 NW 18th Court Pembroke Pines, Florida 33024 954-309-3388

ζ.

August 18, 2016

Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir/Madam:

I am the owner of Poncho's Die Shop, LLC. I wish to file incorporated using the same name, thereby changing from an LLC to Incorporated. (Poncho's Die Shop, Inc.)

Enclosed is my cover letter along with Articles of Incorporation along with my payment of \$78.75.

Should you need any further information, please contact me at 954-309-3399 or via email @gradydieshop@aol.com.

Thank you,

Grady Richardson, Jr.

COVER LETTER

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

SUBJECT: Poncho's	Die Shop, Inc.			
SOBJECT.	(PROPOSED CORPORA	NTE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the ar	ticles 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	
	ADDITIONAL COPY REQ			
Gra FROM:	dy Richardson, Jr.			
TROM.	Nam	e (Printed or typed)		
901	0 NW 18th Court			
		Address		
Pen	abroke Pines, Florida 33024			
	City	, State & Zip		
954	-309-3388			
	Daytime 7	Telephone number		
gra	dydieshop@aol.com			
	E-mail address: (to be use	ed for future annual report	notification)	

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

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

RTICLE II PRINCIPAL OFFICE Principal street address 165 N.W. 38th Avenue		901	Mailing ad 10 N.W. 18th Co	dress, if different urt	is:
iam, Florida 33054 RTICLE III PURPOSE The purpose for which the corporation is organized is:		Per	mbroke Pines, Flo	orida 33024	
		Manufactu	ufacturing		
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-				AUS 2	25 22
<u></u>				<u>.</u>	<u> </u>
		·		2	029 180
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					TIONS
TICLE IV SHA number of shares	IRES of stock is:				
number of shares	of stock is: TIAL OFFICERS AND/OR DIRECTORS itle: Grady Richardson, Jr., Manager	·· -	d Title:		
number of shares	of stock is: FIAL OFFICERS AND/OR DIRECTORS itle: Grady Richardson, Jr., Manager 9010 NW 18th Court	Name and		# + t ₂	
number of shares FICLE V INIT Name and Ta	of stock is: FIAL OFFICERS AND/OR DIRECTORS itle: Grady Richardson, Jr., Manager 9010 NW 18th Court	Name and			
number of shares TICLE V INIT Name and To Address	of stock is: FIAL OFFICERS AND/OR DIRECTORS itle: Grady Richardson, Jr., Manager 9010 NW 18th Court	Name and Address:			
number of shares TICLE V INIT Name and To Address	of stock is: TIAL OFFICERS AND/OR DIRECTORS itle: Grady Richardson, Jr., Manager 9010 NW 18th Court Pembroke Pines, Florida 33024	Name and Address: Name and Address:	d Title:		
number of shares TICLE V INIT Name and Ta Address Name and Tit	of stock is: TIAL OFFICERS AND/OR DIRECTORS Grady Richardson, Jr., Manager 9010 NW 18th Court Pembroke Pines, Florida 33024	Name and Address: Name and Address:	d Title:		
Name and Tit Address Name and Tit Address	of stock is: FIAL OFFICERS AND/OR DIRECTORS Grady Richardson, Jr., Manager 9010 NW 18th Court Pembroke Pines, Florida 33024	Name and Address: Name and Address:	d Title:		

Name a	nd Title:	Name and Title:		
Addres	ss	Address:		
	Aller and the second se			
ARTICLE VI	REGISTERED AGENT			
The <u>name and I</u> Name:	Florida street address (P.O. Box NOT acceptal Grady Richardson, Jr,	ole) of the registered agent is:		ŋ
Address:	9010 NW 18th Court		16 8	1151A1 3.35
	Pembroke Pines, Florida 33024	. 	AUG 26	OH OF (
ARTICLE VII	<u>INCORPORATOR</u>		AM 11: 02	Y OF S
The name and a	address of the Incorporator is:		: 02	TATE LATIONS
Name:	Grady Richardson, Jr.			SNS
Address:	9010 NW 18th Court			
	Pembroke Pines, Florida 33024			
Effective date, i	date is listed, the date must be specific and o	. (OPTIONAL) cannot be more than five business da	ys prior or 90 bi	ısiness
	te inserted in this block does not meet the appli effective date on the Department of State's rec		s date will not be	listed as
	umed as registered agent to accept service of p. I am familiar with and accept the appointment			ignated i
-	ly Required Signature/Registered Agen		8/18/16	
I submit this de	ocument and affirm that the facts stated herei	n are true. I am aware that the false i		vitted in c
avcument to the	a Department of State constitutes a third degree and state wolson has been defined by the constitutes a third degree with the constitutes a third degree and state and state and state are stated as a state and stated as a state and stated as a state are stated as a sta	jeiony as provinca for in 8.617.155, F.	8/18/16	
Req	uired/Signature/Incorporator		/ Date	