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FLORIDA PROFIT/NON PROFIT CORPORATION

GRD, INC

Place Grands

GAD, INC.	
Certificate of Status	0
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SEP 1/ 2016

S. GILBERT

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9/8/2016



September 12, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: C & R, INC. REF: W16000062719

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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COVER LETTER

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

SUBJECT:	<u> </u>	ATE NAME – MUST INCL	UDE SURFOX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REOUTRED

EROM-	RICHARD IVANOVS
FROM.	Name (Printed or typed)
	530 KINGBIRD CIRCLE
	Address
	DELRAY BEACH, FL. 33444
	City, State & Zip
	954-421-6191
	Daytime Telephone number
	GCLCONSTRUCTION2@AOL.COM
	E-mail address: (to be used for future annual report holification)

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

H 16000223650

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

he name of the corporat	TE tion shall be: GRD, INC.		16 SED 12 AM 9:
RTICLE II PRI	NCIPAL OFFICE Principal street address	Mailing	address, if different is:
30 KINGBOF			ी ने किया है। हो की
DELRAY BEA	CH, FL. 33444		· · · · · · · · · · · · · · · · · · ·
		-	
RTICLE III PUR ne purpose for which t	he corporation is organized is:		
To trans	act any and al	1 Jawful	business,
			· · · · · · · · · · · · · · · · · · ·
	AL OFFICERS AND/OR DIRECTOR		
Address	ESA KINODIDO CIDOLE	Address:	
·	DELRAY BEACH, FL. 33444		
By 3 spb.1		Name and White	
	-	•	·
Address	·	Address:	· ·
Name and Title:	<u> </u>	Name and Title:	
Address	——————————————————————————————————————	Address:	
		· 	

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Name and	Trile:	Name and Title:
Address		Address:
	·	
ARTICLE VI	PEGISTERED AGENT orids street address (P.O. Box NOT acceptable) of	fthe remistered pount les
Name:	RICHARD IVANOVS	, into software on where we
Address:	530 KINGBIRD CIRCLE	-
	DELRAY BEACH, FL. 33444	-
<u>ARTICLE VII</u>	INCORPORATOR	
The name and ad	dress of the incorporator is:	
Name:	RICHARD IVANOVS	-
Address:	530 KINGBIRD CIRCLE	-
	DELRAY BEACH, FL. 33444	· -
Having been naa this certificate, I d	ned as registered agent to accept service of process, un familiar with and accept the appointment as reg	s for the above stated corporation at the place designated i fistered agent and agree to act in this capacity
	Kisher Oliva	9/8/16
	Required Signature/Registered Agent	Date
	ument and offirm that the facts stated herein are t Separtment of State conspigues a third degree felon	true. I am aware that the false byformation submitted in ty as provided for in s.817.155, F.S.
	subral Gun	9/8/16
· — — — — — — — — — — — — — — — — — — —	Required Signature/Incorporator	Date

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