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(F	(Requestor's Name)				
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	MAIL MAIL				
☐ PICK-UP	MAIL MAIL				
(E	Business Entity Name)				
	Document Number)				
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Certified Copies	Certificates of Status				
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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: BP	GCRG, Inc.				
	(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an	original and one (1) copy of the	articles of incorporation and	i a check for:		
■ \$70.0 Filing Fo		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status		
	. • • • •	\$, :		
FROM:	Pete Kratzenberg				
	Name (Printed or typed)				
	P.O. Box 1061				
	Address				
	Palm Harbor, FL 34682				
	City, State & Zip				
	727-480-5626				
	Daytime Telephone number				
	petek6@hotmail.com				
	E-mail address: (to be used for future annual report notification)				

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)

<u>RTICLE II PRIN</u>	CIPAL OFFICE Principal street address	Mailing	Mailing address, if different is:	
3638 131st Street N Clearwater, FL 33762		P.O. Box 1061 Palm Harbor, FL 34682		
				RTICLE III PURF ne purpose for which
			7	
			PR 26 PM	
			3. S	
RTICLE IV SHAP ne number of shares o			₩ - 1	
ne number of shares o	f stock is: AL OFFICERS AND/OR DIRECTOR	<u>S</u>		
ne number of shares o	f stock is: AL OFFICERS AND/OR DIRECTOR Pete Kratzenberg, President	<u>S</u> Name and Title:	»· ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
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ne number of shares of the number of shares of shares of the number of shares of the number of shares of the number of shares	f stock is: AL OFFICERS AND/OR DIRECTOR Pete Kratzenberg, President P.O. Box 1061 Palm Harbor, FL 34682	S Name and Title: Address: Name and Title:	»·· ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
ne number of shares of sha	f stock is: AL OFFICERS AND/OR DIRECTOR Pete Kratzenberg, President P.O. Box 1061 Palm Harbor, FL 34682	S Name and Title: Address: Name and Title:	·	
ne number of shares of shares of shares of shares. Name and Title Address Name and Title Address	f stock is: AL OFFICERS AND/OR DIRECTOR Pete Kratzenberg, President P.O. Box 1061 Palm Harbor, FL 34682	S Name and Title: Address: Name and Title: Address:		

Name an	d Title:	Name and Title:	
Address		Address:	
	<u>REGISTERED AGENT</u>		
The <u>name and F</u>	lorida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Juan Pacheco	_	\$ 3
Address:	3638 131st Street N		
	Clearwater, FL 33762		
ARTICLE VII	INCORPORATOR		3
The name and a	ddress of the Incorporator is:		
Name:	Pete Kratzenberg		
Address:	P.O. Box 1061		
	Palm Harbor, FL 34682		
Effective date, if	EFFECTIVE DATE: Other than the date of filing: date is listed, the date must be specific and can	. (OPTIONAL nnot be more than five days p	.) prior or 90 days after the
Note: If the date	e inserted in this block does not meet the applica effective date on the Department of State's record		ts, this date will not be listed as
	med as registered agent to accept service of proc am familiar with and accept the appointment as		
	Jun Parken		03/20/17
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein of Departinent of State constitutes a third degree fe		
-			. 03/20/17
Requ	irea Signature/Incorporator		Date

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