

P19000001638

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
GB HOMESTEAD CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2019 JAN - 8 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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

ARTICLE I NAMEThe name of the corporation shall be: GB HOMESTEAD CORP**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

13400 SW 288 STHOMESTEAD, FL 33033**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: MARTIAL ARTS SCHOOL**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CLAUDIO BERGAMASCHI

Name and Title: _____

Address PRESIDENT

Address: _____

13400 SW 288 STHOMESTEAD, FL 33033Name and Title: PAULO ROBERTO DE CASTRO

Name and Title: _____

Address VICE-PRESIDENT

Address: _____

13400 SW 288 STHOMESTEAD, FL 33033

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: CLAUDIO BERGAMASCHI
Address: 13400 SW 288 ST
HOMESTEAD, FL 33033

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

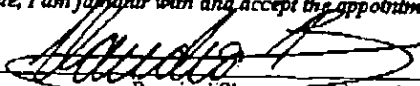
Name: CLAUDIO BERGAMASCHI
Address: 13400 SW 288 ST
HOMESTEAD, FL 33033

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

x 
Required Signature/Registered Agent

1-7-2019
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

x 
Required Signature/Incorporator

1-7-2019
Date