Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORP Account Number : I201060000009 : (305)599-0839 Fax Number : (303)592-9591

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Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION GC MENEGUZZI PROPERTIES, INC.

Certificate of Status	0
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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)

ARTICLE I	TICLE I NAME GC MENEGUZZI PROPERTIES, INC.				
ARTICLE II	PRINCUPAL OFFIC	CE			
	Principal stre			Mailing address, if diff	ferent is:
8339 NW 25 C			- <u>-</u>	SAME AS PRINCIPAL	
COOPER CITY	, FLORIDA 33024		· -		
ARTICLE III	URPOSE	P.E	- MTAL PROPE	PTY MANAGEMENT	
The purpose for v	which the corporation	n is organized is:		RTY MANAGMENT	
		<u></u>			
 .					
					
					
					· · · · · · · · · · · · · · · · · · ·
ARTICLE IV S	SHARES 10	000			3 £
The number of sha	ores of stock is:				±1.5 •
ARTICLE V 1	NITIAL OFFICER	S AND/OR DIRECTO	<u>PRS</u>		; (o
Name an	d Title: ALY MENE	GUZZI PRESI	IDENT	nd Title:	
Address	8839 NW 21	6 CT	Address		
	dooper o	CITY, FLORIDA 330			
				-	
	ALY MENE	GUZZ! TREA	SURE	-	
Name and	8839 NW 26		Name a	nd Title:	
Address	-	CITY, FLORIDA 3302	Address 24	5:	
	-	,			
	-	·			
Name and	Title:	<u></u>	Name a	nd Title:	
Address					· · · · · · · · · · · · · · · · · · ·
			- •		

Name and	đ Títle:_		Name and Title:	
Address	-		Address:	
ARTICLE VI R	orida str	eet address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	BRITO	& BRITO ACCOUNTING, INC.		
Address:	407 L	NCOLN ROAD, L'NIT 9A		
	MIAMI	BEACH, FLORIDA 33139		
ARTICLE VII I	NCORP	<u>QRATOR</u>		
The name and add				# . L *
Name:	AL	Y MENEGUZZI		-
Address:	83	89 NW 26 CT	_	چ: دي
	CO	OPER CITY, FL 33024	-	70
ARTICLE VIII Effective date, if or (If an effective date filing.)	ther than	TVE DATE: the date of filing: d, the date must be specific and canno	(OPTIONAL	.) prior or 90 days after the
Note: If the date in the document's effe	nserted i	n this block does not meet the applicable te on the Department of State's records.	statutory filing requirement	ts, this date will not be listed as
Having been named this certificate, I am	d as regi familia	stered agent to accept service of process r with quit accept the appointment as reg	for the above stated corpor istered agent and agree to c	ration at the place designated in act in this capacity
	j			1/14/2019
I on hands about		Required Signature Registered Agent		Date
document to the Dep	rent and Pa rtin en	affirm that the facts stated herein are to of State constitutes a third degree felong	true. I am aware that the f is as provided for in \$817.15	alse information submitted in a 55, F.S.
5.7.	المرا			1/14/2019
Kcquired :	Signati	reducorporator		Date
i				

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