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| (Requestor's Name) | | | | |
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| (City/State/Zip/Phone #) | | | | |
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| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | | | | |
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| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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2019 MAY -2 AM 9: 11
SECRELARY OF STATE
TALLARY SEEF EL

LAW OFFICES OF KEVIN D. DENNIS ATTORNEY AT LAW

45 ALMERIA AVENUE CORAL GABLES, FLORIDA 33134

MIAMI-DADE: (305) 577-0311 FACSIMILE:

(305) 577-0321

April 17, 2019

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

KEVIN D. DENNIS

GROWERS ARE US, LLC - L11000001829 RE:

GROWERS ARE US, INC -

Dear Dept. of State:

Our firm, (with the consent of the Manager, Daniel Wahl), represent Growers Are US, LLC - Document Number L11000001829. For tax purposes, we wish to create a corporation under the same name, i.e., GROWERS ARE US, INC, with the same individual, Daniel Wahl, as President and shareholder. Because the corporation names are the same (except of LLC and INC), we contacted the Division of Corporations and were told to submit a hard copy application with an explanation letter so that the application would not be rejected.

With the consent of GROWERS ARE US, LLC - L11000001829 and its manager. Daniel Wahl, we request you accept this new application for GROWERS ARE US, INC. If you have any questions, please contact the undersigned.

Sincerely.

Kevin Dennis

I Daniel Wahl, consent to the creation of Growers Are Us, Inc.

Daniel Wahl.

COVER LETTER

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

| SUBJECT: GROW | ERS ARE US, INC. | | |
|----------------------|--|--|---------------------------------------|
| SUBJECT: | (PROPOSED CORPORA | ATE NAME – <u>MUST INCL</u> | <u>UDE SUFFIX</u>) |
| Enclosed are an ori | ginal and one (1) copy of the art | icles of incorporation an | d a check for: |
| ■ \$70.00 Filing Fee | □ \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | & Certificate of Status |
| | | ADDITIONAL CO | PY REQUIRED |
| | | | |
| EROM: | ANIEL F. WAHL | | |
| <u> </u> | Nam | e (Printed or typed) | |
| 68 | 31 PINEHURST DRIVE | | |
| | <u></u> | Address | |
| М | IAMI, F1, 33015 | | |
| | City | . State & Zip | · · · · · · · · · · · · · · · · · · · |
| (30 | 05) 606-2675 | | |
| | Daytime 1 | l'elephone number | |
| un | itedfr@bellsouth.net | | |
| | F-mail address: (to be use | ed 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)

| ARTICLE 1 NAME The name of the corpora | GROWERS ARE US, INC. | | |
|--|--|-------------------------|---|
| ARTICLE II PRINC | Principal street address | Mailing addr | ess, if different is: |
| 683 I PINEHURST DR | IVE | | |
| MIAMI, FL 33015 | | | |
| ARTICLE III PURPO The purpose for which t | | FUL PURPOSE | |
| | | | 2019 HAY -2 AM 9: 11 SECRETAL AHASSEE, FL |
| | ES 100 Stock is: AL OFFICERS AND/OR DIRECTORS DANIEL F. WAHL - President. Sec e: 6831 PINEHURST DRIVE | Name and Title: | |
| Name and Title Address | CARLOS SPRINGMUHL - V.P 6831 PINEHURST DRIVE MIAMI, FL 33015 | Address: | |
| Name and Title Address | A831 PINEHHIRST DRIVE | Name and Title:Address: | |
| | | | |

| Name a | ınd Title: | Name and Title: | |
|---|--|----------------------------------|--|
| Addre | | Address: | |
| | | | _ |
| | | | |
| | | | |
| | REGISTERED AGENT Florida street address (P.O. Box NOT acceptate | ole) of the registered agent is: | |
| Name: | DANIEL F. WAHL | | |
| Address: | 6831 PINEHURST DRIVE | | |
| | MIAMI, FL 33015 | | 2019 HAY SECRE |
| | | | |
| ARTICLE VII | <u>INCORPORATOR</u> | | HH 2 |
| The name and a | address of the Incorporator is: | | SSE |
| Name: | DANIEL F. WAHL | | O 9: 11 F STATI |
| Address: | 6831 PINEHURST DRIVE | | |
| | MIAMI, FL 33015 | | |
| Effective date, i (If an effective filing.) | ** EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and c | rannot be more than five day | ys prior or 90 days after the |
| | te inserted in this block does not meet the application of State's reco | | nents, this date will not be listed as |
| | umed as registered agent to accept service of pr I am familiar with and accept the appointment | | |
| | Required Signature/Registered Agen | | 4/18/19 |
| | Required Signature/Registered Agen | t | Date |
| | ocument and affirm that the facts stated herein e Department of State constitutes a third degree | | |
| * | on cidd | | 4/15/19 |
| Requ | ain Ciahl uired Signature/Incorporator | . | Date |