

P 96000085686

TRANSMITTAL LETTER

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

SUBJECT: GreCOR Inc
(Proposed corporate name - must include suffix)

800001965918

-10/07/96--01001--016

***122.50 ***122.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: GreCOR Inc
Name (Printed or typed)

3940 Metro Pkwy #117
Address

Fort Myers, FL 33916
City, State & Zip

941-218-3440-
Daytime Telephone number

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
OCT 17 AM 9:04

SN OCT 9 1996

W96-21322

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 9, 1996

CORINNE LESSAM
3940 METRO PKY. #117
FORT MYERS, FL 33916

SUBJECT: GRECOR INC
Ref. Number: W96000021322

We have received your document for GRECOR INC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

**THE REGISTERED OFFICE LISTED IN YOUR ARTICLES OF CORPORATION
MUST BE CONSISTENT THROUGHOUT THE DOCUMENT.,**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Sandy Ng
Document Specialist

Letter Number: 396A00045996

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

FILED
96 OCT 17 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

GreCOR INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3940 METRO PKwy #117
FT. MYERS, FL 33906

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CORINNE LESSAM

~~1409 BARCELONA AVE~~

~~FT. MYERS FL 33901~~

3940 METRO PKwy #117

FT. MYERS, FL 33916

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CORINNE LESSAM
1407 Barcelona Ave
FT MYERS, FL 33901

GREGG BUELL
5313 Summerlark Rd #11
Ft. Myers FL 33919

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

2 day of OCT, 19 96.

(An additional article must be added if an effective date is requested.)

Corinne Lessam
Signature

Gregg Buell
Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Greer Corp Inc

2. The name and address of the registered agent and office is:

CORINNE LESSAM
(NAME)
3940 Metro PKWAY #117
(P.O. Box or Mail Drop Box ~~NOT~~ ACCEPTABLE)
FT. MYERS, FL 33916
(CITY/STATE/ZIP)

FILED
96 OCT 17 AM 9:04
TALLAHASSEE, FLORIDA
STATE

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corinne Lessam
(SIGNATURE)

10/2/96
(DATE)