

P99000002540

Form 1

TRANSMITTAL LETTER

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

200002734242--5  
-01/08/99--01026--014  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: P. G. I. Industries, INC.  
(Proposed corporate name - must include suffix)

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: Peter Griffis  
Name (Printed or typed)

11591 NW 39th ST  
Address

Coral Springs, FL 33065  
City, State & Zip

954-753-3241  
Daytime Telephone number

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 JAN -8 AM 9:02

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

## ARTICLES OF INCORPORATION

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

1. The name of the corporation shall be: P. G. I. Industries, 99 JAN 28 AM 9:02
2. The principal place of business and mailing address of the corporation is: Home.  
11591 NW 39th ST. Coral Springs, FL 33065
3. The corporation shall have the authority to issue 1,000,000 shares of stock.
4. The registered agent of the corporation is James Griffis and the registered street address is 11591 NW 39th ST. Coral Springs, Florida 33065.
5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: Peter Griffis  
11591 NW 39th ST  
Coral Springs, FL 33065

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Peter Griffis whose street address is 11591 NW 39th ST. Coral Springs, FL 33065

Dated 1-5-99

Peter Griffis  
Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 1-5-99

[Signature]  
Registered Agent