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JRECK SUBS GROUP, INC.

2101 W. State Road 434, Suite 100
Longwood, Florida 32779

700002899457-5
-06/09/99-01058-006
*****70.00 *****70.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
99 JUN -9 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CB
6-11-99
4

Examiner's Initials

**ARTICLES OF INCORPORATION
OF
GENERAL REPORTING & DISCLOSURE CO., INC.**

The undersigned, acting as incorporator of a Florida corporation under the Florida General Corporation Act, Chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation for such Corporation.

ARTICLE I

NAME

The name of the corporation is General Reporting & Disclosure Co., Inc.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
1574 Eagle Nest Circle, Winter Springs, Florida 32708.

ARTICLE III

CAPITAL STOCK

The Corporation is authorized to issue 500 shares of Common Stock with a par value of One Dollar (\$1.00).

ARTICLE IV

INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial Registered Agent is: Michael Cronin, 1574 Eagle Nest Circle, Winter Springs, Florida 32708.

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TALLAHASSEE, FLORIDA

ARTICLE V**INCORPORATOR**

The name and address of the person signing these Articles is:

Name

Address

Michael Cronin

1574 Eagle Nest Circle, Winter Springs, FL 32708

IN WITNESS WHEREOF, the undersigned has executed these Articles of
Incorporation this 3rd day of April, 1999.

JUNE


MICHAEL CRONIN, Incorporator

NY 783025010

STATE OF FLORIDA

COUNTY OF *Simone*

BEFORE ME, the undersigned authority, authorized to take acknowledgments in the State and County set forth above, personally appeared Michael Cronin, personally known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed these Articles of Incorporation and he did not take an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 3rd day of April, 1999.

JUNE

 6/3/99
Notary Public

My commission expires:



CERTIFICATE OF DESIGNATION
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: General Reporting & Disclosure Co., Inc.
2. The name and address of the Registered Agent and office is:

Michael Cronin
1574 Eagle Nest Circle
Winter Springs, Florida 32708

Signature: 

Michael Cronin

Title:

Incorporator

Date:

April, 1999

June 3

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.

Signature: 

Michael Cronin

Date:

June 3, 1999

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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