TRANSMITTAL LETTER

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

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-06/30/99--01045--006
*****87.50   *****87.50

SUBJECT: _____ Gladston Rowe, 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 of Status	☐ $78.75 Filing Fee & Certified Copy	☒ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: _____ Gladston Rowe _____
Name (Printed or typed)

_____ 2080 NW 78th Avenue _____
Address

_____ Sunrise, FL 33322 _____
City, State & Zip

_____ (954) 316 - 5681 _____
Daytime Telephone number

F. CHESSER   JUL   5 1999

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

ARTICLES OF INCORPORATION

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

ARTICLE I   NAME
The name of the corporation shall be: GLADSTON ROWE, INC.

ARTICLE II   PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

2080 NW 78TH Avenue
Sunrise, FL 33322

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 Florida street address of the initial registered agent are:

Gladston Rowe
2080 NW 78TH Avenue
Sunrise, Florida 33322

ARTICLE V   INCORPORATOR
The **name and address** of the incorporator to these Articles of Incorporation are:

Gladston Rowe
2080 NW 78TH Avenue
Sunrise, FL 33322

_____   _____7/1/99_____
Signature/Incorporator   Date

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

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

_____   _____7/1/99_____
Signature/Registered Agent   Date