F2000000059

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
02 07 Office Use Only
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088

Date: January 15, 2020	- Accounts. 12000000000
Name: KEN HOWELL	_
Reference #:1175490	
Entity Name: GSS PRO	PERTY SERVICES XXXIII, INC.
✓ Articles of Incorporation/Author	rization to Transact Business
Amendment	
☐ Change of Agent	ISSUES? CALL
Reinstatement	KEN:
Conversion	518-213-0738
Merger	
☐ Dissolution/Withdrawal	70.00
☐ Fictitious Name	^ :
Other	On
	(.)
Authorized Amount: \$70	0.00
Signature:	

COVER LETTER

TO:	Registration Section Division of Corporations		
SURI	ECT:	GSS Property Services XXXIII, Inc.	
0,012		ame of corporation - must include suffix	
Dear S	ir or Madam:		
"Certi	ficate of Existence," or "Certif	gn Corporation for Authorization to Transact Buffcate of Good Standing" and check are submitted to transact business in Florida.	siness in Florida," ed to register the
Please	return all correspondence con-	cerning this matter to the following:	
		Colleen Humes	
		Name of Person	
		Cogency Global Inc.	
		Firm/Company	
		850 New Burton Rd #201	25
		Address	
		Dover, DE 19904	<u> </u>
		City/State and Zip code	ហ៊
		ropertyServices@gssnyc.com	
	E-mail ad	dress: (to be used for future annual report notifi	cation) 🧀
For fu	rther information concerning the	his matter, please call:	©)
	Jill A. Russo	at (212) 295.2742	
	Name of Person	Area Code Daytime Telephone	Number
	STREET/COURIER ADD Registration Section Division of Corporations Clitton Building 2661 Executive Center Circl Tallahassee, FL 32301	Registration Section Division of Corpor P.O. Box 6327	n ations
Enclos	sed is a check for the following	g amount:	

* \$78.75 Filing Fee & Certificate of Status

\$70.00 Filing Fee

\$78.75 Filing Fee & Certified Copy

\$87.50 Filing Fee.

Certified Copy

Certificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

GSS Property Services XXXIII Inc.

(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 68 S. Service Rd., Suite 120 Melville, NY 11747 (Principal office address) (Current mailing address, if different) Jame and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC.	Delaware 3. the law of which it is incorporated)	(FEI number, if app	
(Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 68 S. Service Rd., Suite 120 Melville, NY 11747 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC.			
(Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 68 S. Service Rd., Suite 120 Melville, NY 11747 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC.			blicable)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 68 S. Service Rd., Suite 120 Melville, NY 11747 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC.	2/30/2013 5.		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 68 S. Service Rd., Suite 120 Melville, NY 11747 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC.	rporation)	(Date of duration, if other t	than perpetual)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 68 S. Service Rd., Suite 120 Melville, NY 11747 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC.		•	,
(Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC.	(Date first transacted business in		(y)
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC. Titce Address: 115 North Calhoun Street, Suite 4	68 S. Service Rd., Suite 1	20 Melville, NY 11747	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC. Tice Address: 115 North Calhoun Street, Suite 4	(Princi	pal office address)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: COGENCY GLOBAL INC. Tice Address: 115 North Calhoun Street, Suite 4			
Name: COGENCY GLOBAL INC. Tice Address: 115 North Calhoun Street, Suite 4	(Current maili	ng address, if different)	(~)
Tice Address: 115 North Calhoun Street, Suite 4	ess of Florida registered agent: (P.0	D. Box <u>NOT</u> acceptable)	(1) (1) (1)
Tice Address: 115 North Calhoun Street, Suite 4	COGENCY GLOBAL INC.		
nee Address.	— 15 North Calhoun Street, Suit∈	: 4	\
(City) (Zip code)			
(City) (Zip code)	I alianassee	, Florida	* *1
	(City)	(z.ip code)	
	vation, I hereby accept the appoint with the provisions of all statutes is	ment as registered agent and agro relative to the proper and comple	ee to act in this cap te performance of
Registered agent's a		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability 68 S. Service Rd., Suite 120 Melville, NY 11747 (Principal office address) (Current mailing address, if different) ess of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. 15 North Calhoun Street, Suite 4 Tallahassee , Florida 32301 (City) (Zip code)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

11.	ryanics a	na ous	111022	addicase.	יט כ	Officers	androi	ancen

A. DIRECTORS

Chairman:	n/a	
		
Vice Chairman:	n/a	
Address:		
		<u> </u>
	Frank B. Bilotta	
Address:	68 S. Service Rd., Suite 120 Melville, NY 11747	
	Director: Kevin P. Burns 68 S. Service Rd., Suite 120 Melville, NY	11747
Director:	Bernard J. Angelo	
Address:	68 S. Service Rd., Suite 120 Melville, NY 11747	<u> </u>
B. OFFICERS	W + D D	
President:		
Address:	68 S. Service Rd., Suite 120 Melville, NY 11747	
		
Vice President:	Jill A. Russo	<u></u>
Address:	68 S. Service Rd., Suite 120 Melville, NY 11747	
		rö
Secretary:	Bernard J. Angelo	<u> ထ်</u>
Address:	00 0 0 1 0 1 400 1 1 1 1 1 1 1 1 1 1 1 1	
	Kevin P. Burns	
	68 S. Service Rd., Suite 120 Melville, NY 11747	
	ary, you may attach an addendum to the application listing additional officers and/	or directors.
12	Signature of Director or Officer	
The officer or dire are true and that h	Signature of Director or Officer ector signing this document (and who is listed in number 11 above) affirms that the or she is aware that false information submitted in a document to the Department only as provided for in s.817.155, F.S.	facts stated herein
13	Jill A. Russo, Vice President	
	(Typed or printed name and capacity of person signing application)	



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GSS PROPERTY SERVICES XXXIII, INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF JANUARY,

A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GSS PROPERTY SERVICES XXXIII, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

33.6 m. St. 183



Authentication: 202186087

Date: 01-14-20