

PROPOS 5/885

TRANSMITTAL LETTER

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

900003262349--9
-05/22/00--01138--001
*****78.75 *****78.75

G A P RELOCATION, INC.

SUBJECT

(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 **X \$78.75** ___ \$78.75 ___ \$ 87.50

Filing Fee

Filing Fee

Certificate of Status

Filing Fee

& Certified Copy

Filing Fee,

Certified Copy

& Certificate

of Status

ADDITIONAL COPY

REQUIRED

FROM:

Joseph E. Pearson

Name (Printed or typed)

11504 Smokethorn Drive

Address

Riverview, FL 33569

City, State & Zip

(813) 672-9854

Daytime Telephone Number

FILED
00 MAY 22 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FL 32314

5-26
102

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

ARTICLES OF INCORPORATION
OF
G A P Relocation, Inc.

FILED
00 MAY 22 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FL 32399

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:

G A P Relocation, Inc.

ARTICLE II PRINCIPLE OFFICE

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

**11504 Smokethorn Drive
Riverview, Fl 33569**

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Gale A. Pearson
11504 Smokethorn Drive
Riverview, Fl 33569

ARTICLE V INCORPORATORS

The **name and addresses** of the incorporators to these Articles of Incorporation are:

Gale A. Pearson	Joseph E. Pearson
11504 Smokethorn Drive	11504 Smokethorn Drive
Riverview, Fl 33569	Riverview, Fl 33569

The undersigned incorporator(s) has (have) executed these Articles of
Incorporation this 17TH day of MAY, 2000.


Signature


Signature

Articles of Incorporation
Filing Fee- \$35.00

FILED
00 MAY 22 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:
2. The name and address of the registered agent and office is:

G A P Relocation, INC.

Gale A Pearson
11504 Smokethorn Drive
Riverview, FL 33569

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 MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Gale A. Pearson

DATE

5-17-00