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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 GET SET MERCHANDISING SERVICE, INC. SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: **□** \$70.00 \$78.75 **Q** \$78,75 = \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED MELVIN C HUNT ACCOUNTING, INC.
Name (Printed or typed) FROM: __ 124 KINGSWAY ROAD Address City, State & Zip 813-685-2234 Daytime Telephone number

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

FILED

ARTICLES OF INCORPORATION	O2 DEC -2 PM 3: 56
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FORETARY OF STATE
4 700000 70 7 474 1170	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE I NAME	
The name of the corporation shall be:	_
GET SET MERCHANDISING SERVICE, INC.	<u>-</u>
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	:
1810 DURANT ROAD	
VALRICO,FL 33594	- ·
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ALL LAWFUL BUSINESS BY LAW, IN THE STATE OF FLORIC	DA —
ARTICLE IV SHARES	_
The number of shares of stock is:	
1,500	-
ARTICLE V INITIAL OFFICERS/DIRECTORS (option	onal)
The name(s), address(es) and title(s):	
ALAN L GARY PRESIDENT/DIRECTOR 1810 DURANT ROAD	
VALRICO, FL 33594	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
_ ALAN L GARY	-
1810 DURANT ROAD	
VALRICO, FL 33594	-
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	÷.
ALAN L GARY	-
1810 DURANT ROAD	
VALRICO,F L 33594	
**************************************	**************************************
Having been named as registered agent to accept service of process for the ab certificate, I am familiar with and accept the appointment as registered agent of	hove stated corporation at the place designated in thi
	_
× (Ma havr	
Signature/Registered Agent /Incorporator	Date
]/	