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SECRETARY OF STATE
SECRETARY OF STATE
FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: GARY Mc ADAMS INC					
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	sinal and one (1) copy of the art	icles of incorporation and	d a check for:		
\$70,00	⊠ \$78.75	□ \$78.75	□ \$87.50		
Filing Fee		Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy			
		1	& Certificate of		
			Status		
		ADDITIONAL COPY REQUIRED			
FROM:	GARRETT V. M	c Arams			
Name (Printed or typed)					
4139 EAGLE AVENUE					
Address					
Key WEST. FL 33040					
City, State & Zip					
	305-731-	0501			
305- 731- 0501 Daytime Telephone number					

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



ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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<u>NAME</u> ARTICLE I

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

GARY MC ADAMS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4139 EAGLE AVE

Key WEST FL 33040

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE MARKETING SERVICES

ARTICLE IV

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

GARRETT J. Mc ADAMS, PRES. 4139 EAGLE AVE

KRY WEST, FL 33040

VENNIFER A. Mc ASAMS V. 4139 EAGLE AVE Key WEST. FL 33040

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

GARRETT J. Mc ADAMS

4139 EAGLE AVE

Key WEST, FL

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:

GARRETT V. Mc ADAMS

4139 EAGLE AVENUE

Key WEST, FL 33040

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator