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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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TRANSMITTAL LETTER

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

SUBJECT:	Gulf Coast Liquidators, Inc.			
	(PROPOSED CORPORA	TE NAME — MUSTRINGE	UDE SUITEIX)	
	**		· · ·	
Enclosed are an o	riginal and one (1) copy of the art	icles of incorporation an	d a check for:	
2 \$70.00	· · · · · · · · · · · · · · · · · · ·	\$78.75	□ \$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of	
į		ADDITIONAL CO	Status	
j		ADDITIONAL CO	A I REQUIRED	
FROM:	Stephen D. Briggs			
· · · · · · · · · · · · · · · · · · ·	Name	(Printed or typed)		
3	4057 48th Avenue S.			
		Address		
	St. Petersburg, FL 33711			
	¿ Čity	, State & Zip		
	727 492 6061			
	Daytime '	Telephone number	· · · · · · · · · · · · · · · · · · ·	

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

A ARTICLES OF INCORPORATION

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

<u>NAME</u> ARTICLE I

The name of the corporation shall be:

Gulf Coast Liquidators INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4057 48th Avenue South St. Petersburg, FL 33711

ARTICLE III PURPOȘE

The purpose for which the corporation is organized is: Auctions

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

Stephen D. Briggs 4057 48th Ave. South St. Petersburg, FL 33711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stephen D. Briggs 4057 48th Ave. South St. Petersburg, FL 33711

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

ignature/Registered Agent Signature/Incorporator

Date