

PO3000040538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

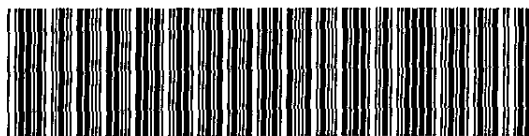
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 APR -7 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. SMITH APR 10 2003

## TRANSMITTAL LETTER

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

SUBJECT: G. S. Construction Repair, Remodeling Inc  
(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 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: EVGENI KHOLOPNYI  
Name (Printed or typed)

11259 Reed Island Drive  
Address

Do FL 32226  
City, State & Zip

904 642-2128  
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)

## ARTICLE I NAME

The name of the corporation shall be:

G.S.S. CONSTRUCTION REPAIR, REMODELING, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11259 REED ISLAND DRIVE  
JACKSONVILLE, FL 32225

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW BUSINESS

## ARTICLE IV SHARES

The number of shares of stock is: 300 SHARES

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

EVGENI KHOLODNYI - President  
11259 REED ISLAND DRIVE  
JAX FL 32225

Michael CUELO - Vice-President  
1805 Scott Road  
Jacksonville, FL 32259

## ARTICLE VI REGISTERED AGENT

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

EVGENI KHOLODNYI - P.  
11259 REED ISLAND DRIVE  
JAX FL 32225

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EVGENI KHOLODNYI  
11259 REED ISLAND DRIVE  
JAX FL 32225

\*\*\*\*\*

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

Date

Signature/Incorporator

Date

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04.05.03

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