

P05000049692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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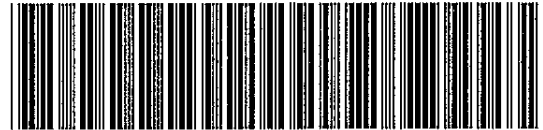
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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ILLINOIS STATE FILING

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4/4/✓

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

SUBJECT: GAL FRIDAY SERVICES, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input checked="" type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: James I. Kershaw
Name (Printed or typed)

550 W.Main St., Tavares, Fl. 32778
Address

City, State & Zip _____

352-742-4236
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 23, 2005

JAMES I. KERSHAW
550 W. MAIN STREET
TAVARES, FL 32778

SUBJECT: GAL FRIDAY SERVICES, INC.
Ref. Number: W05000015010

We have received your document for GAL FRIDAY SERVICES, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is T05000000207 - GAL FRIDAY SERVICES AND DESIGN OF A SUNBURST.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

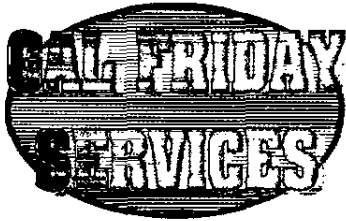
If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Document Specialist
New Filings Section

Letter Number: 205A00019966

352-636-5996

19 N. Eustis Street - Eustis, FL 32726 • Mailing Address: P.O. Box 440 - Umatilla, FL 32784



March 29, 2005

Ms. Loria Poole
Document Specialist
New Filing Section
Division of Corporations

Re: Gal Friday Services, Inc.

Dear Ms. Poole,

I am the owner of Gal Friday Services. I have previously filed a fictitious name and the trademark and service mark of Gal Friday Services, a sunburst and they are under my name. I have used the name since April 2004 as shown on the trademark application .

The incorporation filing was done at my request by my husband who is an Assistant State Attorney in Lake County. It was filed in the blind to avoid the numerous vendor contacts who screen all new corporation filings. And without my name for that reason.

As the owner of the fictitious name and the trade and service mark I do consent to this incorporation as shown with the request which is resubmitted herewith and I do waive any conflict with the trade or service mark fictitious name.

This should be acceptable, if not please contact me at: 352-636-5996 or PO Box 440 Umatilla, FL 32784. Any paperwork should go to this mailing address. Not the Tavares address on paperwork submitted.

Sincerely,

Kay E. Kershaw
Owner
PO Box 440 Umatilla, FL 32784

Kay E. Kershaw
3-29-05

352-636-5996

19 N. Eustis Street - Eustis, FL 32726 • Mailing Address: P.O. Box 440 - Umatilla, FL 32784

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:

GAL FRIDAY SERVICE, INC.,

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

19 North Eustis St. Eustis, Fl. 32726
Mailing—PO Box 440, Umatilla, Fl. 32784

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Deal in real and personal property and all legitimate business interests

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

James L. Kershaw, 550 W.Main St., Tavares, Fl. 32778 Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

James L.Kershaw, 550 W.Main St.Tavares, Fl. 32778

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James L.Kershaw, 550 W.Main St. Tavares.Fl. 32778

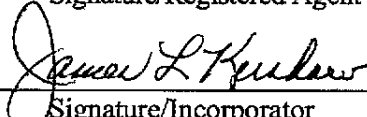
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

3-14-05

Date



Signature/Incorporator

3-14-05

Date

FILED
05 APR -1 PM 2:55
CLERK OF STATE
TALLAHASSEE FLORIDA