

POS000053265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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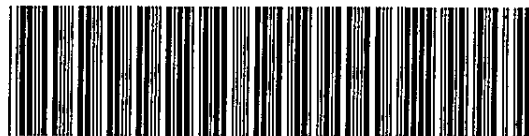
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/23/05--01099--008 **70.00

FILED
05 APR 11 AM 7:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

605-16004

T. Hampton APR 12 2005

TRANSMITTAL LETTER

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

SUBJECT: ACE AMUSEMENT INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: RAUL MOLINE
Name (Printed or typed)

1577 SW 1ST WAY #20
Address

DEERFIELD BEACH FL 33441
City, State & Zip

561-433-9372
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 29, 2005

RAUL MOLINE
1577 SW 1ST WAY
20
DEERFIELD BEACH, FL 33441

SUBJECT: ACE AMUSEMENT INC
Ref. Number: W05000016004

We have received your document for ACE AMUSEMENT INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 P01000067506 (ACE AMUSEMENTS, INC.).

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) 245-6855.

Tammy Hampton
Document Specialist
New Filings Section

Letter Number: 805A00021310

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 P Amusements INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1577 SW 1ST WAY #20
DEERFIELD BEACH, FL 33441

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

20

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

RAUL MOLINE PRES
1577 SW 1ST WAY #20
DEERFIELD BEACH, FL 33441

ARTICLE VI REGISTERED AGENT

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

RAUL MOLINE

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RAUL MOLINE

1577 SW 1ST WAY #20
DEERFIELD BEACH, FL.
33441

05 APR 11 AM 7:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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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

Raul Moline

Signature/Registered Agent

3/22/05  
Date

Raul Moline

Signature/Incorporator

3/22/05  
Date