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# TRANSMITTAL LETTER

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

SUBJECT: GN PROFESSIONAL SERVICE (PROPOSED CORPORAT	vices Inc.		
Enclosed are an original and one (1) copy of the artic  \$70.00   \$78.75  Filing Fee Filing Fee  & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: GINA NICOLEAU Name (Printed or typed)			
P.O. Box 29775	3 ddress FL 33029 State & Zip		

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

# ARTICLES OF INCORPORATION GN PROFESSIONAL SERVICES, INC. 05 JUN 24 PM 2: 47

FIFD SELLE LARGE OF STATE TALLAHASSEE, FLORIDA

# ARTICLE I

#### **NAME**

The name of this corporation is GN Professional Services Inc.

#### ARTICLE II

# PRINCIPAL OFFICE

The principal place of business/mailing address is P.O. Box 297753, Pembroke Pines, Florida 33029.

#### ARTICLE III

#### **PURPOSE**

The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Florida.

# ARTICLES IV

#### **SHARES**

The amount of the total authorized capital stock of this corporation is one hundred shares with no par value.

#### ARTICLE V

#### INITIAL OFFICERS AND/OR DIRECTORS

The name and mailing address of the officers and/or directors is as follows:

Gina Nicoleau 737 NW 208th Drive Pembroke Pines, Florida 33029

# ARTICLE VI REGISTERED AGENT

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

Registered Agent Legal Services, Inc. 1333 North Duval Street Tallahassee, FL 32303

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gina Nicoleau 737 NW 208<sup>th</sup> Drive Pembroke Pines, Florida 33029

Signature of Incorporator

6/20/05

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

Signature/Registered Agent

Date