

706 000121305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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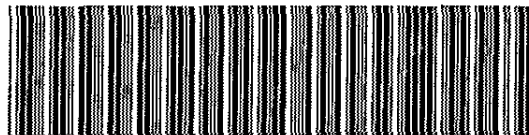
(Business Entity Name)

(Document Number)

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

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STATE  
TALLAHASSEE  
FLORIDA

SEP 21 2006

## COVER LETTER

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

SUBJECT: G.I. Professional Services Corp.

(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: MICHAEL L. CEASER - FRESH START FINANCIAL SERVICES, INC.  
Name (Printed or typed)

9951 ALTANTIC BLVD., SUITE 313  
Address

JACKSONVILLE, FL 32225  
City, State & Zip

(904) 723-3555  
Daytime Telephone number

RECEIVED  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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**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.I. PROFESSIONAL SERVICES CORP.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9105 CAROLINE RIDGE LANE  
JACKSONVILLE, FL 32225

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Services and any lawful activity permitted by the State of Florida.

## ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GARY J. HOWELL, SR.  
9105 CAROLINE RIDGE LANE  
JACKSONVILLE, FL 32225  
PRESIDENT/DIRECTOR

## ARTICLE VI REGISTERED AGENT

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

Michael L. Ceaser  
9951 Atlantic Blvd., Suite 313  
Jacksonville, FL 32225

## ARTICLE VII INCORPORATOR

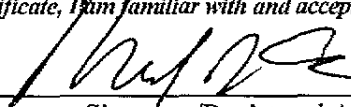
The name and address of the Incorporator is:

GARY J. HOWELL, SR.  
9105 CAROLINE RIDGE LANE  
JACKSONVILLE, FL 32225

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*

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

  
Signature/Incorporator

9/15/06  
Date

9/15/06  
Date