

P11000003086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

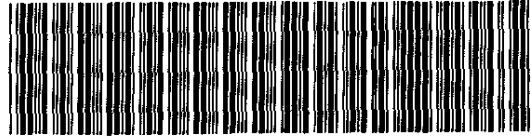
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200190007912

200190007912  
01/10/11--01037--022 \*\*70.00

FILED  
11 JAN 10 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ps. check

**COVER LETTER**

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

**SUBJECT:** Gulf Sunset Properties 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

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

FROM: Donald A Eckert  
Name (Printed or typed)

5680 66th St N  
Address

St Petersburg, FL, 33709  
City, State & Zip

727-537-9302  
Daytime Telephone number

deckert@gulfsunsetproperties.com  
E-mail address: (to be used for future annual report notification)

**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** Gulf Sunset Properties Inc  
The name of the corporation shall be:

FILED

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
5680 66th St N  
St Petersburg, FL, 33709

11 JAN 10 PM 3:00  
Mailing address, if different is:  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
For all real estate business and transactions.

**ARTICLE IV SHARES**  
The number of shares of stock is: 100 common shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: David B Liddle Vice President/ Treasurer Name and Title: \_\_\_\_\_  
Address: 924 24th Ave N Address: \_\_\_\_\_  
St Petersburg, FL, 33704

Name and Title: Donald A Eckert President/Secretary Name and Title: \_\_\_\_\_  
Address: 5680 66th St N Address: \_\_\_\_\_  
St Petersburg, FL, 33709

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

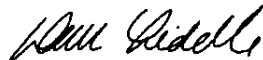
Name: David B Liddle  
Address: 924 24th Ave N  
St Petersburg, FL, 33704

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Donald A Eckert  
Address: 5680 66th St N  
St Petersburg, FL, 33709

*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*

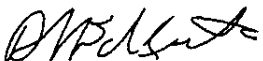


Required Signature/Registered Agent

1/3/2011

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*



Required Signature/Incorporator

1/3/2011

Date