

P11000045063

\_\_\_\_\_

(Requestor's Name)

\_\_\_\_\_

(Address)

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(Address)

\_\_\_\_\_

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

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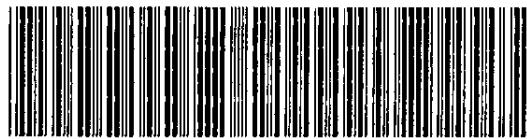
(Business Entity Name)

\_\_\_\_\_

(Document Number)

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

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TALLAHASSEE, FLORIDA

11 MAY -9 PM 12:12

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## COVER LETTER

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

**SUBJECT: GULF COAST MICROSYSTEMS INCORPORATED**  
**(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       \$78.75  
Filing Fee      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 R. GENTRY

Name (Printed or typed)

590 HORSEMAN DRIVE

Address

OVIEDO, FL 32765

City, State & Zip

407 359 5170

Daytime Telephone number

ray@dasiwebsite.com

E-mail address: (to be used for future annual report notification)

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

FLORIDA DEPARTMENT OF STATE  
NEW FILING SECTION  
DIVISION OF CORPORATIONS  
P O BOX 6327  
TALLAHASSEE, FL 32314

RE: DUPLICATE NAME

There is an existing duplicate name on file for: GULF COAST MICROSYSTEMS LLC

DOCUMENT NO: L02000027754

This is to certify that I am the registered owner of GULF COAST MICROSYSTEMS LLC

Document no: L02000027754

The enclosed documents and filing fee is to file Articles of Incorporation for a for-profit corporation for:

GULF COAST MICROSYSTEMS INCORPORATED

THANK YOU

  
Donald R Gentry

590 Horseman Drive

Oviedo, Fl 32765

Phone: 407 359 5170

Email: ray@dasiwebsite.com

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

11 MAY - 9 PM 12: 12

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** **GULF COAST MICROSYSTEMS INCORPORATED**  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
590 HORSEMAN DRIVE  
OVIEDO, FL 32765

Mailing address, if different is:

11 MAY - 9 PM 12: 12  
FLORIDA STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**ANY AND ALL LAWFUL BUSINESS**

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: DONALD R. GENTRY PRES. Name and Title: \_\_\_\_\_  
Address: 590 HORSEMAN DRIVE Address: \_\_\_\_\_  
OVIEDO, FL 32765 \_\_\_\_\_

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

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: DONALD R GENTRY  
Address: 590 HORSEMAN DRIVE  
OVIEDO, FL 32765

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: DONALD R GENTRY  
Address: 590 HORSEMAN DRIVE  
OVIEDO, FL 32765

*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*

Dowell R. Gentry  
Required Signature/Registered Agent

MAY 5, 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.*

Dowell R. Gentry  
Required Signature/Incorporator

MAY 5, 2011

Date