

# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : CSH SERVICES, LLC

Account Number: 120070000160
Phone: (800)494-3124

Fax Number : (561)455-9885

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## FLORIDA PROFIT/NON PROFIT CORPORATION

GMF Multimodal, Inc.

Certificate of Status	0
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or 7/20/11

SECRETARY OF STATE DIVISION OF CORPORATE

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## **ARTICLES OF INCORPORATION**

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In compilance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

GMF MULTIMODAL, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4800 BEACH BOULEVARD, STE 10 JACKSONVILLE, FLORIDA 32207

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

#### ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

## ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

**PRESIDENT** 

CHRISTOPHER GOTSCHALL
4800 BEACH BOULEVARD, STE 10

JACKSONVILLE, FLORIDA 32207

VICE PRESIDENT

TIMOTHY ROBERTSON

4800 BEACH BOULEVARD, STE 10

JACKSONVILLE, FLORIDA 32207

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ARTICLE VI REGISTERED AGENT

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

CHRISTOPHER GOTSCHALL 1513 DERRINGER ROAD JACKSONVILLE, FLORIDA 32225 DIVISION OF CORPORATE

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ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

CHRISTOPHER GOTSCHALL 4800 BEACH BOULEVARD, STE 10 JACKSONVILLE, FLORIDA 32207

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.

CHRISTOPHER GOTSCHALL / Registered Agent

Date

CHRISTOPHER GOTSCHALL /Incorporator

7-25-2011

Date