

P11000077078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

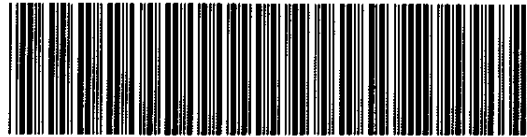
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/18/11--01004--022 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 AUG 26 AM 11:46

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W110000377

COVER LETTER

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

SUBJECT: GF2, 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

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Deborah Butan
Name (Printed or typed)

6965 Cypress Cove Circle
Address

Jupiter, FL 33458
City, State & Zip

561-632-5722
Daytime Telephone number

dabutan@gmail.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
Division of Corporations

RECEIVED
11 AUG 26 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 19, 2011

DEBORAH BUTAN
6965 CYPRESS COVE CIRCLE
JUPITER, FL 33458

SUBJECT: GF2, INC.
Ref. Number: W11000037929

We have received your document for GF2, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Jessica A Fason
Regulatory Specialist II

Letter Number: 811A00017109

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:

GF2, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6965 Cypress Cove Circle
Jupiter, FL 33458

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Marketing

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deborah Butan, President
Address: 6965 Cypress Cove Circle
Jupiter, FL 33458

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Deborah Butan
Address: 6965 Cypress Cove Circle
Jupiter, FL 33458

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Deborah Butan
Address: 6965 Cypress Cove Circle
Jupiter, FL 33458

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

x Deborah Butan
Required Signature/Registered Agent

x 7-7-11
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.

Deborah Butan
Required Signature/Incorporator

8-11-11
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 AUG 26 AM 11:46

APR 26 2012