

P11000108877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

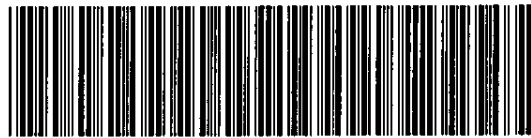
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: Gallop Franklin II D.B.A. The Gallop Group
(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: Gallop Franklin II
Name (Printed or typed)

1101 MISSIONWOOD LN
Address

Tallahassee, Florida 32304
City, State & Zip

850-445-2943
Daytime Telephone number

Gallop.FranklinI@gmail.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

The name of the corporation shall be: Gallup Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1101 MISSION WOOD LN
TALLAHASSEE, FL, 32304

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: General consulting

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gallup P. Franklin II Name and Title: _____
Address: President/C.E.O. Address: _____
1101 MISSION WOOD LN TALL
FL 32304

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: Gallup P. Franklin II
Address: 1101 MISSION WOOD LN
TALL FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gallup P. Franklin II
Address: 1101 MISSION WOOD LN
TALL FL 32304

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

Gallup P. Franklin II
Required Signature/Registered Agent

12/29/11
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.

Gallup P. Franklin II
Required Signature/Incorporator

12/29/11
Date

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