

2/3/12

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Florida Department of State
Division of Corporations
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To:

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**FLORIDA PROFIT/NON PROFIT CORPORATION
FOS-GIL INTL CORPORATION**

Certificate of Status	1
Certified Copy	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 FEB -3 AM 11:25

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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FOS-GIL INT'L CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1936 Bruce B Downs, Suite 345
Wesley Chapel, FL 33544

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000,000 Shares at \$0.01 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Tamara Foster
1936 Bruce B Downs, Suite 345
Wesley Chapel, FL 33544

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Tamara Foster - President/Director
20257 Merry Oak Avenue, Tampa, FL 33647


ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Tamara Foster
20257 Merry Oak Avenue, Tampa, FL 33647

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

2nd day of February 2012



Tamara Foster
Signature

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNA TING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FOS-GIL INT'L CORPORATION


2. The name and address of the registered agent and office is:

Tamara Foster
Name

1936 Bruce B Downs, Suite 345
(P.O. Box or Mail Drop Box NOT Acceptable)

Wesley Chapel, FL 33544
(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.



Tamara Foster
SIGNATURE

02/02/2012
(Date)

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