## P13000054342

(Requestor's Name)				
(Add	ress)			
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PICK-UP	☐ WAIT	MAIL		
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(Doc	ument Number)	)		
Certified Copies	Certificate	s of Status		
Special Instructions to F	iling Officer:			

Office Use Only



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## **COVER LETTER**

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

SUBJECT: GFA	Medical Marketing, Staffi		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	d 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 CO	PPY REQUIRED
TROM:	ernadeth P. Para Name 911 SE 23rd Aver	(Printed or typed)	· · · · · · · · · · · · · · · · · · ·
		ddress	
0	cala FL 34471	(Car Car	
	•	State & Zip	
3:	52 216 5493		
- Company	Daytime Te	lephone number	
В	ern@gfamedicalr	narketing.cor	m
	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)

ICLE II PRI	NCIPAL OFFICE				
44 05 00	Principal street address	Ma	ailing address, if different	t is:	
··· ·· ·· · · · · · · · · · · · · · ·	rd Avenue	<del></del>			
ala, FL. 3	34471				
ICLE III PUR	POSE ANY AN		III RUSINESS		
urpose for which t	he corporation is organized is:		OE BOOM VECO		
			<del>.</del>	·	
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,				<u> </u>	DISTAID 3038
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ICLE IV SHA		.UE		8- اللا 13	DIVISION OF SC
umber of shares of	stock is:	<del> </del>		- الل	DIVISION OF CORPO
umber of shares of	stock is:  TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>		8- اللل	DIVISION OF CORPORAL
CLE V INI	Stock is:  FIAL OFFICERS AND/OR DIRECTOR  BERNADETH P PARAISO	<b>S</b> Name and Title:		JUL -8 AM	DIVISION OF CORPORATION
umber of shares of	Stock is:  FIAL OFFICERS AND/OR DIRECTOR BERNADETH P PARAISO 2911 SE 23RD AVE	<u>s</u>	.10	JUL -8 AM	SECRETARY OF STATIONS
CLE V INI	Stock is:  FIAL OFFICERS AND/OR DIRECTOR  BERNADETH P PARAISO	<b>S</b> Name and Title:		JUL -8 AM	SECRETARY OF SORPORATIONS
CLE V INI	Stock is:  FIAL OFFICERS AND/OR DIRECTOR BERNADETH P PARAISO 2911 SE 23RD AVE	<b>S</b> Name and Title:		JUL -8 AM	SECRETARY OF STATIONS
CLE V INI  Name and Title  Address	Stock is:  FIAL OFFICERS AND/OR DIRECTOR BERNADETH P PARAISO  2911 SE 23RD AVE  OCALA FL 34471	S Name and Title: Address:	,	JUL -8 AM 9:58	
CLE V INI  Name and Title  Address	Stock is:  FIAL OFFICERS AND/OR DIRECTOR BERNADETH P PARAISO 2911 SE 23RD AVE	S Name and Title: Address:	,	JUL -8 AM 9:58	
CLE V INI  Name and Title  Address	Stock is:  FIAL OFFICERS AND/OR DIRECTOR BERNADETH P PARAISO  2911 SE 23RD AVE  OCALA FL 34471	S Name and Title: Address: Name and Title:	,	JUL -8 AM 9:58	
CLE V INT  Name and Title  Address	Stock is:  FIAL OFFICERS AND/OR DIRECTOR BERNADETH P PARAISO  2911 SE 23RD AVE  OCALA FL 34471	S Name and Title: Address: Name and Title: Address:		JUL -8 AM 9:58	
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Name and Title Address  Address	Stock is:  FIAL OFFICERS AND/OR DIRECTOR BERNADETH P PARAISO  2911 SE 23RD AVE  OCALA FL 34471	S Name and Title: Address: Name and Title: Address: Name and Title:		JUL -8 AM 9:58	

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT   orida street address (P.O. Box NOT acceptable) of	Cthe registered agent is:
Name: Address:	BERNADETH P. PARAISO 1911 S.E. 23RD AVENUE OCALA, FL. 34471	
ARTICLE VII	INCORPORATOR	Con Service Con Se
The name and ad	ldress of the Incorporator is:	<b>3</b> Por
Name:	INCORPORATETIME.COM INC	<b>9.</b> RAI
Address:	173 N MAIN STREET, SUITE 400 SAYVILLE, NY 11782	TONS
I submit this doc	Required Signature/Registered Agent  ument and affirm that the facts stated herein are  Department of State constitutes a third degree felon	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
	Required Signature/Incorporator	Date '