

P 14000002557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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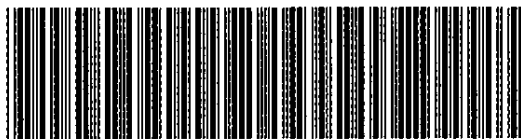
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
2014 JAN -6 PM 3:02

1/4

COVER LETTER

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

SUBJECT: **GSJ 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **Gregory Schurawel Jr**

Name (Printed or typed)

5500 Swift Rd

Address

Sarasota, FL 34231

City, State & Zip

941-356-0231

Daytime Telephone number

Gregschrj@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: GSJ INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

5500 Swift Rd

Sarasota, FL 34231

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Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Contractor Service And Repair Medical Equipment
Specializing In Radiation Cancer Units, CT, and MRI

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gregory Schurawel Jr Pres. Name and Title: _____

Address 5534 Swift Rd Address: _____
Sarasota, FL 34231

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(conti.)

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DIVISION OF CORPORATIONS

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:

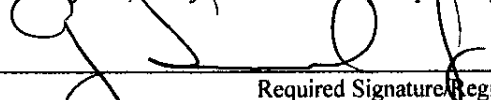
Name: Gregory Schurawel Jr
Address: 5534 Swift Rd
Sarasota, FL 34231

ARTICLE VII INCORPORATOR

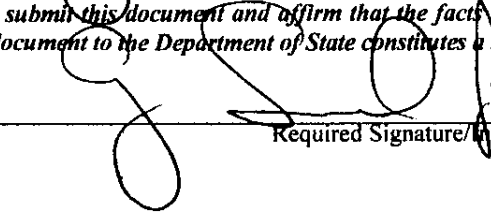
The **name and address** of the Incorporator is:

Name: Gregory Schurawel Jr
Address: 5534 Swift Rd
Sarasota, FL 34231

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

 01/01/2014
Required Signature Registered Agent 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.

 01/01/2014
Required Signature Incorporator Date