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**YUDELL and LONOFF, LLC**  
**CARL R. YUDELL**

*Attorney at Law*  
400 Central Ave., Suite 110  
Northfield, IL 60093  
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Email: [carl@yudell.net](mailto:carl@yudell.net)

March 6, 2014

VIA UNITED PARCEL SERVICE

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re:** Gateway Hospitality Consultants, Inc.

Dear Sir or Madam:

Enclosed for the above-referenced Corporation, please find the following:

- 1) Cover Letter – Florida Form requesting the filing of the Articles AND a Certified Copy;
- 2) "Original" Articles of Incorporation – Signed and Stamped by an officer of the corporate Registered Agent AND the Incorporator (page with Incorporator's ink signed signature also enclosed);
- 3) Two (2) Additional Copies of the fully executed Articles; and
- 4) Check number 1578 in the amount of \$78.75 for the Filing Fee and a Certified Copy.

**For the return of the file stamped Articles and Certified Copy to our office, we have enclosed a pre-addressed overnight UPS envelope.** A label is affixed to the envelope and the shipping fee will be billed to our account. Simply deposit the envelope in a UPS drop box or take the envelope to a UPS store. For tracking purposes, we have made a photocopy of the shipping label for our records.

Should you have any questions regarding the enclosed Amendment, please call 847-441-9500, extension 228.

Your assistance is greatly appreciated.

Very truly yours,



Diane T. Parker

Encl.

**COVER LETTER**

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

**SUBJECT: GATEWAY HOSPITALITY CONSULTANTS, 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: Diane T. Parker, Yudell and Lonoff, LLC**

Name (Printed or typed)

**400 Central Avenue #110**

Address

**Northfield, IL 60093**

City, State & Zip

**847-441-9500, Ext. 228**

Daytime Telephone number

**diane@yudell.net**

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: GATEWAY HOSPITALITY CONSULTANTS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

200 S. Biscayne Boulevard

459 Rock Hall Circle

Suite 2790

Grayslake, IL 60030

Miami, FL 33131

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to provide design and purchasing services for the hospitality industry.

**ARTICLE IV SHARES**

The number of shares of stock is: 2,400

FILED  
CLERK OF STATE  
14 MAR 7 PM 12:05  
DIVISION OF CORPORATIONS

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Stephanie K. M. Cox, Pres.

Name and Title: Stephanie K. M. Cox, Director

Address 200 S. Biscayne Blvd, Ste.2790

Address: 200 S. Biscayne Blvd, Ste.2790

Miami, FL 33131

Miami, FL 33131

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

(cont.)

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: Corporation Service Company  
Address: 1201 Hays Street  
Tallahassee, FL 32301

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Carl R. Yudell  
Address: 400 Central Ave. #110  
Northfield, IL 60093

*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*

\_\_\_\_\_  
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.*

Carl R. Yudell  
\_\_\_\_\_  
Required Signature/Incorporator

3/6/14  
\_\_\_\_\_  
Date