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COVER LETTER

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

SUBJECT: GULFCOAST FIRESTOP, 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 Filing Fee

Filing Fee & Certificate of Status

\$78.75

\$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

FROM: GULFCOAST FIRESTOP, INC. Name (Printed or typed) 8419 WASHINGTON STREET Address RIVERVIEW, FL 33569 City, State & Zip (813) 389-7507 Daytime Telephone number JMCBUDD1@AOL.COM E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

, ,	In compliance with Chapter 607 and	•	1	14 AUG
TICLE I NA		RESTOP	, INC.	Nº N
<u>TICLE II PR</u>	INCIPAL OFFICE Principal <u>street</u> address		Mailing address, if differ	
	IINGTON STREET V, FL 33569		······	
	v, TL 33309		·····	`L>
TICLE III PU	RPOSE ODV OD			
purpose for which	the corporation is organized is: any an		ui business.	
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number of shares of TICLE V IN	of stock is:			
	nt stock is: 100 ITIAL OFFICERS AND/OR DIRECTOR Ile: Don Carpintier (P)		Christoph No	
number of shares of s	rtial officers and/or director le: Don Carpintier (P) 1509 Wildfowl PI.		16103 Lytha	m Dr.
number of shares of TICLE V IN . Name and Tit	nt stock is: 100 ITIAL OFFICERS AND/OR DIRECTOR Ile: Don Carpintier (P)	_ Name and Title		m Dr.
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e number of shares of TICLE V IN Name and Tit Address Name and Titl	ntial officers and/or director le: Don Carpintier (P) 1509 Wildfowl PI. Lutz, FL 33549 e: Jasen Buddemeier (T)	Name and Title Address: Name and Title	16103 Lytha Odessa, FL Melissa Budde	m Dr. 33556 emeier (S
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,			(conti.)
Name and	d Title:	Name and Title:	
Address	·····	Address:	
ARTICLE VI The <u>name and Fi</u>	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) of	the registered agent is:	14 P
Name:	Melissa Buddemeier		14 AUG 25 AUG AHASS
Address:	8419 Washington Street		·····
	Riverview, FL 33569		
ARTICLE VII	INCORPORATOR		77 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	Melissa Buddemeier		
Address:	8419 Washington Street		
	Riverview, FL 33569		

Having been named as registered agent to accept service of process for the above stated corporation at the place designated i this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

isu Required Signature/Registered Agent

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8/17/14 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.

ellay Required Signature/Incorporator

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