

P16000015214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600280871736

01/14/16--01015--011 \*\*87.50

16 FEB 16 PM 3:27  
RECEIVED  
STATE  
SECRETARY  
OF STATE  
TALLAHASSEE, FL 32301

will be 6004

MD 2/17

## COVER LETTER

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

SUBJECT: GEN DYNAMICS 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  
☐ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☒ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Gwendolynne E. Noack  
Name (Printed or typed)  
701 Java Road  
Address  
Cocoa Beach, FL 32931  
City, State & Zip  
(321) 474-9121  
Daytime Telephone number  
gwennoack@yahoo.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 28, 2016

GWENDOLYNNE E. NOACK  
701 JAVA ROAD  
COCOA BEACH, FL 32931

SUBJECT: GEN DYNAMICS, INC.  
Ref. Number: W16000006004

We have received your document for GEN DYNAMICS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey  
Regulatory Specialist II  
New Filing Section

Letter Number: 316A00001879

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:

GEN Dynamics, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is

701 Java Road  
Cocoa Beach, FL 32931

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

1 one share of stock.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Gwendolyn E. Noack

Name and Title:

Address

Director

Address:

701 Java Road  
Cocoa Beach, FL 32931

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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

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

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Gwendolynne E. Noack  
Address: 701 Java Road  
Cocoa Beach, FL 32931

16 FEB 16 PM 3:27  
FEB 16 2016  
FEB 16 2016

**ARTICLE VII INCORPORATOR**

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

Name: Gwendolynne E. Noack  
Address: 701 Java Road  
Cocoa Beach, FL 32931

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: January 9<sup>th</sup>, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Gwendolynne E. Noack  
Required Signature/Registered Agent

1-12-16  
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.*

Gwendolynne E. Noack  
Required Signature/Incorporator

1-12-16  
Date