

P16000062075

(Requestor's Name)

(Address)

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PICK-UP  WAIT  MAIL

(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 JUL 26 PM 3:20

N. Guzman

7127166

**COVER LETTER**

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

SUBJECT: GT SYSTEM CONTRATOR 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: GERMAIN BISSON  
Name (Printed or typed)

305 NE 4TH CT  
Address

HALLANDALE FL 33009  
City, State & Zip

L 954-818-4926  
Daytime Telephone number

danielbisson@icloud.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

June 2, 2016

GERMAIN BISSON  
305 NE 4TH CT  
HALLANDALE, FL 33009

SUBJECT: GT SYSTEME CONTRACTOR INC.  
Ref. Number: W16000011192

We have received your document for GT SYSTEME CONTRACTOR INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

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.

You complete ARTICLE VI REGISTERED AGENT NAME AND ADDRESS.

The registered agent must sign accepting the designation.

Please return 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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 716A00003127

RECEIVED

JUL 26

**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: GT SYSTEM CONTRACTOR INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
305 NE 4TH CT  
HALLANDALE  
FLORIDA 33009

Mailing address, if different is:

IDEM

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: GENERAL CONSTRUCTION,  
DRYWALL, FRAMING, CARPENTER

**ARTICLE IV SHARES**

The number of shares of stock is: 1/1000

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

Name and Title: GERMAIN BISSON Name and Title: \_\_\_\_\_

Address 305 NE 4TH CT Address: \_\_\_\_\_  
HALLANDALE FLORIDA  
33009

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

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

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

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

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: GERMAIN BISSON  
 Address: 305 NE 4th CT  
HALLANDALE FL 33009

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: GERMAIN BISSON  
 Address: 305 NE 4th CT  
HALLANDALE FL 33009

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 06/21/2016 (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*

Germain Bisson \_\_\_\_\_ 06/21/2016  
 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.*

Germain Bisson \_\_\_\_\_ 06/21/2016  
 Required Signature/Incorporator Date