

P/7000050783

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000157281 3)))



H170001572813ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800)221-2972
Fax Number : (888)692-9256

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
17 JUN 12 PM 4:57
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
GSS 11, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

FILED
17 MAY 12 AM 10:30
TALLAHASSEE, FLORIDA

Handwritten signature and date 06/13/17

From:

06/12/2017 15:54

#261 P.002/003

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: GSS II, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
250 International Parkway Suite 134
Lake Mary, FL 32746

Mailing address, if different is:
250 International Parkway Suite 134
Lake Mary, FL 32746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gurjit Sidhu/ Director

Address: 250 International Parkway Suite 134
Lake Mary, FL 32746

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

RECEIVED
CLERK OF DISTRICT COURT
17 MAY 12 AM 10:30
TALLAHASSEE, FLORIDA

From:

06/12/2017 15:54

#261 P.003/003

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: Gurjit Sidhu
Address: 250 International Parkway Suite 134
Lake Mary, FL 32746

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jeffrey W Hantony, CPA
Address: 8365 Seneca Turnpike
New Hartford, NY 13413

RECEIVED
JUN 12 2017
TALLAHASSEE, FLORIDA
17 MAY 12 AM 10:30

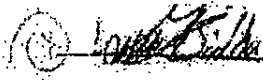
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

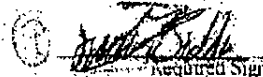


Required Signature/Registered Agent

6/12/17

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.



Required Signature/Incorporator

6/12/17

Date