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Florida Department of State
Division of Corporations
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Per client May 20, 2019 was the original date of file, would prefer this date

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

From:
Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
GAINESVILLE STRATEGIC DEVELOPMENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$70.00

PLEASE PROVIDE ORIGINAL SUBMISSION DATE OF 5/20/2019

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J DENNIS

MAY 22 2019

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

19 MAY 21 PM 2:09

ARTICLE I NAME
The name of the corporation shall be: Gainesville Strategic Development, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
8585 South Tropical Trail	
Merritt Island, FL 32952	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Any lawful purpose.

ARTICLE IV SHARES
The number of shares of stock is: 100 Shares, no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Shawn McManus, President	Name and Title:	Shawn McManus, Secretary/Treasurer
Address	8585 S. Tropical Trail	Address:	8585 S. Tropical Trail
	Merritt Island, FL 32952		Merritt Island, FL 32952
Name and Title:	Shawn McManus, Director	Name and Title:	
Address	8585 S. Tropical Trail	Address:	
	Merritt Island, FL 32952		
Name and Title:		Name and Title:	
Address		Address:	

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

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19 MAY 21 PM 2:09
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE VI REGISTERED AGENT

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

Name: Shawn McManus

Address: 8585 S. Tropical Trail

Merritt Island, FL 32952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shawn McManus

Address: 8585 S. Tropical Trail

Merritt Island, FL 32952

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 days prior or 90 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 — Date: 17MAY19

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 — Date: 17MAY19