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TRANSMITTAL LETTER

97 APR 11 PM 1:09

SEC. STATE DEPT. OF REVENUE

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

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-04/11/97--01082--009
****122.50 ****122.50

SUBJECT: GISELL DISTRIBUTOR, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check
for:

<input type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$122.50 Filing Fee & Certified Copy Additional Copy Required	<input type="checkbox"/> \$131.25 Filing Fee, Certified Copy & Certificate
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FROM: RAMONA RODRIGUEZ
(Name printed or typed)

2217 65TH PLACE NORTH
Address

ST PETERSBURG, FL 33702
City, State & Zip

(813) 521-3855
Daytime Telephone number

Will wait

RECEIVED
97 APR 11 PM 1:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

FILED
97 APR 11 PM 1:09
TALL
FLA

I, the undersigned, do hereby certify that the following is the true and correct copy of the Articles of Incorporation of the following corporation:

ARTICLE I

The name of the corporation shall be

GISELL DISTRIBUTOR, INC.

ARTICLE II

The principal office of the corporation shall be at

2217 65TH PLACE NORTH
ST PETERSBURG, FL 33707

ARTICLE III

The number of shares of stock of the corporation authorized to be issued is hereby set at

100 SHARES

ARTICLE IV

The name and address of the incorporator is

RAMONA RODRIGUEZ
2217 65TH PLACE NORTH
ST PETERSBURG, FL 33707

ARTICLE V INCORPORATOR(S)

The instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are)

RAMONA RODRIGUEZ

2217 65TH PLACE NORTH

ST PETERSBURG, FL. 33702

I, _____, Secretary of the State of Florida, do hereby certify that

25 000 MARCH

19 97

Ramona Rodriguez
Signature

Signature

Signature

NOTE: It is the responsibility of the incorporator(s) to ensure that the information provided is accurate and complete.

STATE OF FLORIDA
SECRETARY OF STATE

IN ACCORDANCE WITH THE PROVISIONS OF SECTION 697.01, FLORIDA STATUTES, THE
STATE OF FLORIDA HAS RECEIVED THE FOLLOWING STATEMENT OF INTENT TO REGISTER
THE FOLLOWING SECURITY AS A SECURITY REGISTERED IN THE STATE OF FLORIDA

Issuer of the security:

GISELL DISTRIBUTOR, INC.

Name of the person or persons authorized to execute the security:

RAMONA RODRIGUEZ
(Signature)

1317 65TH PLACE NORTH
PETERSBURG, FLORIDA 33702

51 PETERSBURG, FL 33702
(Address)

I, the undersigned, hereby certify that the above is a true and correct copy of the
provisions of the security as filed in the office of the Secretary of State, and
I further certify that the undersigned is the holder of all shares of
the security and is the person or persons authorized to execute the security.

Ramona Rodriguez
(Signature)

(Date)