97110079914 TRANSMITTAL LETTER

DIVISION OF CORPORATIONS

97 SEP 15 AM 9: 10

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

SUBJECT:	GP MARKETING + MANAGEMENT, INC.	
	(Proposed corporate name - must include suffix)	

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

\$70.00 Filing Fee

\$78.75 Filing Fee

Filing Fee & Certificate □\$122.50

Filing Fee & Certified Copy \$131.25

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: TRA MALKIN
Name (Printed or typed)

10409 OAK BROOK DR.
Address

TAMPA FL 33624
City, State & Zip

813-962-4087

V

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

Daytime Telephone number



ARTICLES OF INCORPORATION

NAME

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be:	MANAGEMENT, INC
ARTICLE II PRINCIPAL OFFICE	

The principal place of business and mailing address of this corporation shall be: GPH+4 10407 CARBROOT DP. TAMPA, FL 33624

ARTICLE III SHARES

ARTICLE I

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000 SHARES

ARTICLE IV <u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

TER MALKIN 10409 DE. 10409 CANBROOM DE. TAMPA, FL 33624

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

MALKIN 10409 OAKBROOK DR. AMPA. FL 33624

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent