

P98000015755

TRANSMITTAL LETTER

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

900002434789--1
-02/19/98--01012--007
*****78.75 *****78.75

SUBJECT: Gotsis Financial Inc.

I enclose the original Articles of Incorporation for the
above corporation and a check in the amount of \$ 78.75.

(Filing Fee & Certificate)

SIGNED: 

From:

Gus Gotsis

Name

3417 Park Square West Suite 2

Address

Tampa FL 33613

City State Zip

1 800 765 5488

Telephone Number

FILED
98 FEB 17 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Q/2-18-98

ARTICLES OF INCORPORATION
OF
Gotsis Financial Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Gotsis Financial Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3417 Park Square West

Suite 2

Tampa FL 33613

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Michael P. Massimini CPA

701 W Swann Ave

Suite 5

Tampa FL 33606

ARTICLE V INCORPORATOR

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

Gus Gotsis

3417 Park Square West

Suite 2

Tampa FL 33613

The undersigned has executed these Articles of Incorporation this
10 day of February 1998.



, Incorporator

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

Gotsis Financial Inc.

2. The name and address of the registered agent and office is:

Michael P. Massimini CPA
701 W Swann Ave
Suite 5
Tampa FL 33606

Signature: _____



Title: _____

INCORPORATOR

Date: _____

2/10/98

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TALLAHASSEE, FLORIDA

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: _____



Date: _____

2/10/98