

P9900006360

TRANSMITTAL LETTER

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

1/14/99

200002745832--0
-01/19/99--01059--010
*****70.00 *****70.00

SUBJECT: G.C.S. DISTRIBUTORS, INC

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
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee, e
Certified Copy
& Certificate

FROM:

GERRY CONTRINO

Name (printed or typed)

701 PINE DR # 102

Address

POMPANO BEACH FL 33060

City, State & Zip

954 941-9621

Daytime Telephone number

99 JAN 19 AM 10:04
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

OB
1-22-99
4

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

G.C.S. DISTRIBUTORS, INC.

ARTICLE II PRINCIPAL OFFICE

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

701 PINE DR # 102
POMPANO BEACH FL 33060

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: ## FIVE THOUSAND COMMON SHARES \$ 1.00 P.V. *****

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GERRY CONTRINO
701 PINE DR # 102
POMPANO BEACH FL 33060

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)


See instructions for officers/directors

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

GERRY CONTRINO
701 PINE DR # 102
POMPANO BEACH FL 33060

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

14th day of JANUARY 1999, 19


* _____
GERRY CONTRINO Signature

Signature

Signature

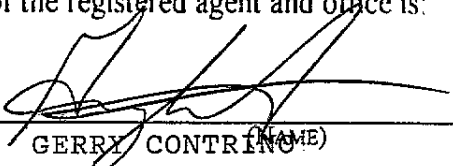
NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
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: G.C.S. DISTRIBUTORS INC.

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

X 


GERRY CONTRINO (NAME)
701 PINE DR # 102

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
POMPANO BEACH FL 33060

(CITY/STATE/ZIP)

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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) 1/14/99
LOUIS P. GAUTHIER
NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXP. JANUARY 27, 1999
COMM. NO. CC 427373
Bonded Thru General Ins. Und

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314