SECRET SEP 22 AM B: 16 TRANSMITTAL LETTER Department of State **Division of Corporations** 500002993 P. O. Box 6327 -09/22/99--01022--004 Tallahassee, FL 32314 ****87.50 *****87.58

SUBJECT: Gulf Coast Investors and Consultants, Inc. (Proposed corporate name - must include suffix)

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

ST0.00 Filing Fee	 \$78.75 Filing Fee & Certificate of Status 	STR.75 Filing Fee & Certified Copy	 \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED 	
FROM:	Eric Hestbeck Name (P	rinted or typed)	. <u> </u>	
	15906 Country Farm Pl. Address			· · · · · · · · · · · · · · · · · · ·
	Tampa, FL 33624 City, State & Zip			
	813–968–3067 Daytime Telephone number			n an

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Gulf Coast Investors and Consultants, Inc.

ARTICLE II PRINCIPAL OFFICE

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

15906 Country Farm Pl. Tampa, FL 33624 ARTICLE III SHARES

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

Eric Hestbeck 15906 Country Farm P1. FL **ÞÖRATOR** ARTI

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

Eric Hestbeck 15906 Country Farm P1. Tampa, FL 33624

Signature/Incorporator

Date

(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

Date

TLED

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