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(Requestor's Name)	_
(Address)	_
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(Document Number)	-
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TRANSMITTAL LETTER

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

SUBJECT: Gill	mer Enterprises Inc.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
.	* 1 1 71 67 7		1 1 1 0	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	i a check for:	
□ \$70.00	□ \$78.75	\$78.75	☑ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
J	& Certificate of Status	& Certified Copy	Certified Copy	
		1	& Certificate o	
			Status	
		ADDITIONAL CO	PY REQUIRED	
	D' 16'- O'	<u> </u>		
FROM:	Diana Marie Gilmer			
	Name	(Printed or typed)		
	1241 Homard Blvd East			
	Address			
			•	
	JAcksonville, Fl 32225			
	City,	State & Zip		
	904-859-2698			
	Daytime T	elephone number		

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

cont-

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETALLY OF STATE
TALLAHASSEE. FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Gilmer Enterprises Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1241 Homard Blvd East Jacksonville, Fl 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is to provide/rent housing to low income families.

ARTICLE IV SHARES

The number of shares of stock is:

Gilmer Enterprises Inc. shall issue 1 common stock at no par value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Diana Marie Gilmer, CEO

ARTICLE VI ___ REGISTERED AGENT

The name and Florida street address of the registered agent is:

Diana Marie Gilmer 1241 Homard Blvd East Jacksonville, Fl 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Diana Marie Gilmer 1241 Homard Blvd East Jacksonville, FI 32225

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

Date

Date