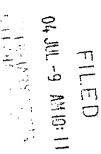
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(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Name	e)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>	Office Use Only	
		<i>.</i> -



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11a

TRANSMITTAL LETTER

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

SUBJECT:	GN MOR-	TO AME - MUST INCL	DPPD4 (
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Nicholas 10711 S	MAVRO (Printed or typed) W 120	MATIS St
	M	Address	2176

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 1, 2004

NICHOLAS MAVROMATIS 10711 SW 120 ST MIAMI, FL 33176

SUBJECT: GN MORTGAGE CORPORATION

Ref. Number: W04000025370

We have received your document for GN MORTGAGE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6884.

Shawn Logan Document Specialist New Filings Section

Letter Number: 704A00042897

•	ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
	ARTICLE I NAME The name of the corporation shall be:
	ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 10711 SW 120 St MIAMI, FL. 33176
	ARTICLE III PURPOSE The purpose for which the corporation is organized is: MORIGAGE BROKER BUSINESS
	ARTICLE IV SHARES The number of shares of stock is: 1000 0 \$\delta\$ 1.00 pAR
	ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): NICholas Mavromatis - President 10711 SW 120 St, Miami, FL. 33176
	ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: NICholas Mayromatu 1071 SW 120 St Miami, FL. 33176
	ARTICLE VII INCORPORATOR The name and address of the Incorporator is: NICMIAS MANNOMALS 1071 SW 120 St MIAMI F2 33176

	Signature/Registered Agent Date
•	Signature/Incorporator Date
	orgination meorporator Date