

P0400013/326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

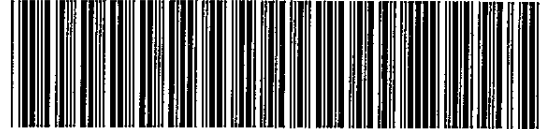
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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: GMCJ Financing, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Carlos A Pereda - President

Name (Printed or typed)

14111 LEANING PINE DRIVE

Address

MIAMI LAKES FL 33014

City, State & Zip

(786) 316-5487 (205) 345-2959
Daytime Telephone number

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

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:

GMCJ Financing, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3701 NW 27 AVE
MIAMI FL 33142

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto Financing

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Carlos A. Pereda - President
14111 LEANING PINE DRIVE, Miami Lakes, Fl 33014

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Carlos A. Pereda - President
14111 LEANING PINE DRIVE, Miami Lakes, Fl 33014

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Carlos A. Pereda - President
14111 LEANING PINE DRIVE, Miami Lakes, Fl 33014


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

 9/12/04

Date



Signature/Incorporator

 9/12/04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA