705000108584

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
PICK-UP WAIT MAIL (Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900057951839

1)8/03/05--01008--009 **78.75

SECRETARY OF STAFF

AUG OA 2005

TRANSMITTAL LETTER

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

SUBJECT: GPW F	inancial, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	_
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:	_
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Geo	off Whelan	70		
	Name	(Printed or typed)		<u> </u>
<u>-</u>	11410 NW 49th Drive); }-
		Address	,	05 AUG -3 PM
(Coral Springs, FL 33076			7 7 7
_	City,	State & Zip		কী ১১ - এ

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

Daytime Telephone number

(954) 427-1480

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:

GPW Financial, Inc.

Ý

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 11410 NW 49th Drive, Coral Springs, FL 33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate/Financial Investments

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Geoff Whelan, President

ARTICLE VI REGISTERED AGENT

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

Geoff Whelan, 11410 NW 49th Drive, Coral Springs, FL 33076

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sandra Hodes, 633 S. Federal Highway, 8th Floor, Fort Lauderdale, FL 33301

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 familial with and accept the appointment as registered agent and agree to act in this capacity

Signature/Revistored Agent

Signature/Incorporator

7-27-05

7-27-05 Date

05 NUG -3 PH 2: 47