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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

## FLORIDA PROFIT/NON PROFIT CORPORATION

### gateway lending group, inc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

10/1801





### ARTICLES OF INCORPORATIONS

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (5) the following Articles of Incorporation.

ARTICLE I

NAME

The name of the corporation shall be:

GATEWAY LENDING GROUP, INC

ARTICLE II

PRINCIPAL OFFICE

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

> 15670 SW 143 Ave Miami, FI 33177

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One thousand (1,000) shares of common stock having a par value of one dollar (\$1) each.

### ARTICLE IV INITIAL OFFICERS AND/OR DIRECTORS

Geter Lopez-President 15670 SW 143 Ave Mismi, Fl 33177

Monica Bello-Vice President 15670 SW 143 Ave . Miami, FI 33177

EMP I RE

0C1-17-2006



# ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Geter Lopez 15670 SW 143 Ave Miami, Fl 33177

## ARTICLE VI INCORPORATOR (S)

The name(s) and street address (es) of the incorporator(s) to these Articles of Incorporation is (are):

Geter Lopez 15670 SW 143 Ave Miami, Fi 33177

The Undersigned incorporator(s) has (have) executed these Articles of incorporation this

Signature

Signature .

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### CERTIFICATE OF DESIGNATED OF

## REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISION OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

### GATEWAY LENDING GROUP, INC

2 The name and address of the registered agent and office is:

Geter Lopez 15670 SW 143 Ave Miami, FL 33177

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 here by accept the appointment as registered agent and agree to set in this capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with

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Division of Corporations. P.O. Box 6327, Tallahassee, F1 32314

and accept the obligations of my position as registered agent.

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