

P07000106786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

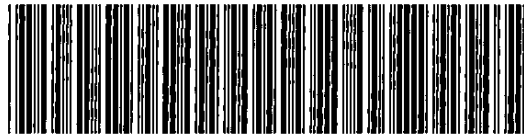
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900109195139

09/17/07--01013--027 **87.50

FILED
2007 SEP 25 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.F. 9-26

COVER LETTER

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

SUBJECT: _____

G.C.M. Institute of Mortgage Finance, 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: _____

Gloria C. Morales

Name (Printed or typed)

2225 - 23rd St SW

Address

Naples FL 34117

City, State & Zip

234-455 4114

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2007

GLORIA C. MORALES
2225 23 ST. SW
NAPLES, FL 34117

SUBJECT: G.C.M. INSTITUTE OF MORTGAGE FINANCE, INC
Ref. Number: W07000045894

We have received your document for G.C.M. INSTITUTE OF MORTGAGE FINANCE, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected 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) 245-6047.

Carolyn Lewis
Document Specialist
New Filing Section

Letter Number: 507A00054847

RECEIVED
07 SEP 26 AM 10:42
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

[Handwritten signature]

ARTICLES OF INCORPORATION

FILED

2007 SEP 25 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

G.C.M. INSTITUTE OF MORTGAGE FINANCE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**2225 23RD ST SW
NAPLES, FLORIDA 34117**

ARTICLE III PURPOSE

The purpose for which this corporation is organization:

TRAINING AND SEMINARS FOR THE MORTGAGE EDUCATION

ARTICLE IV SHARES

The number of shares of stock is

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name and addresses and specific title

**GLORIA C MORALES
2225 23RD ST SW
NAPLES, FL 34117 (PRESIDENT)**

**GLORIA C MORALES
2225 23RD ST SW
NAPLES, FLORIDA 34117(SECRETARY)**

HENRY LARA
2225 23RD ST SW
NAPLES, FLORIDA 34117(TREASURER)

ARTICLE VI REGISTERED AGENT

GLORIA C MORALES
2225 23RD ST SW
NAPLES. FL 34117

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

GLORIA C MORALES
2225 23RD ST SW
NAPLES FL 34117

ARTICLE VIII

THE EFFECTIVE DAY OF THIS CORPORATION SHALL BE OCT 15TH,
,2007

ARTICLE IX

FILED

2007 SEP 25 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**IT IS KNOWN TO ALL PARTIES, THAT THIS
CORPORATION WILL BE A PROFIT CORPORATION,
AND ALL THE NECESSARY DOCUMENTATION WILL
BE FILED ACCORDING TO THE LAW.**

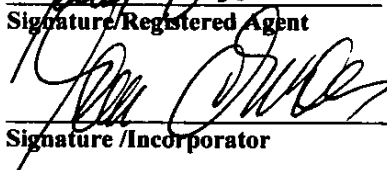
Having been named as registered agent to accept service of process for the above stated corporation
At the place designated in this certificate, I am familiar with and accept the appointment as
registered agent and agree to act in this capacity.



Signature/Registered Agent



Date



Signature /Incorporator



Date