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| (Re                                     | equestor's Name)  |             |  |  |
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| (Cit                                    | y/State/Zip/Phone | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL        |  |  |
| (Bu                                     | siness Entity Nar | me)         |  |  |
| (Document Number)                       |                   |             |  |  |
| Certified Copies                        | _ Certificates    | s of Status |  |  |
| Special Instructions to Filing Officer: |                   |             |  |  |
|   |                   |             |  |  |
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SECRETARY OF STATE



# **COVER LETTER**

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

| SUBJECT:             | GURA COLLECTION AGENCY, INC.                 |  |  |  |  |
|----------------------|--|--|--|--|--|
|                      | (PROPOSED CORPORA                            | TE NAME – <u>MUST INCL</u>                         | UDE SUFFIX)  |  |  |
| Enclosed are an orig | rinal and one (1) copy of the artic          | cles of incorporation and                          | l 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  PPY REQUIRED |  |  |
| FROM:                | GUADALUPE M. OROSCO  Name (Printed or typed) |  |  |  |  |
|                      |  |  |  |  |  |
|                      |  | O, FL 32825<br>State & Zip                         |  |  |  |
|                      | 407-383-015                                  | 52 / 321-231-419                                   | 5  |  |  |

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:

**GURA COLLECTION AGENCY, INC.** 

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6955 HANGING MOSS ROAD SUITE 111 ORLANDO, FL 32807

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO BE THE MIDLE PERSON FOR THE CONSUMER IN THE COLLECTION OF PASS DUE DEBTS.

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GUADALUPE M. OROSCO 10146 BRIDLEWOOD AVE ORLANDO, FL 32825 PRESIDENT

#### ARTICLE VI REGISTERED AGENT

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

RAMON ORTIZ-CRUZ 950 OLD BARN ROAD ORLANDO, FL 32825 VICE-PRESIDENT

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

GUADALUPE M. OROSCO 10146 BRIDLEWOOD AVE ORLANDO, FL 32825

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

Signature/Régistered Agent

ignature/registered Agent

Signature/Incorporator

Sept. 13th, 2007

Date

Sept. 13th, 2007

Date

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