## P10000020832

(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



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## **COVER LETTER**

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

SUBJECT: Greater	Love Outreach Management Gro	oup, Inc	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles 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 o Status
		ADDITIONAL CO	PY REQUIRED
-		e (Printed or typed)	
140	073 Whitebirch Way	Address	
<u>Nor</u>	rth Fort Myers, FL 33903	, State & Zip	
239	9-823-2227		
<del></del>	Daytime	l'elephone number	
csh	eppard1@embarqmail.com		
		ed for future annual report	notification)

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:	
Greater Love Outreach Management Group, Inc.	
GREETER LOVE OF	
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	
14073 Whitebirch Way	
North Fort Myers, FL 33903	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Manuement Consulting	
Asset/Property Management Monagement Consulting Grant Management + Compliance	
ARTICLE IV SHARES	
The number of shares of stock is: 100 shares	المنظم المرازيات
	<b>5</b>
ADMICLE II INITIAL OFFICEDS AND/OD DIDECTORS	FILED BIASSES
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):	
Connie 5. Myers, President/Owner	出生 co m
Connie S. Miger	교 교 교
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:	
Connie 5 Myers 2100 NW 28th Avenue	
Cape CoraL, FL 33993	
APPROLET IN THE PROPERTY AND THE PROPERTY OF T	
ARTICLE VII INCÓRPORATOR  The name and address of the Incorporator is:	
Connie 5 Myers 2100 NW 28th Avenue	
Cape CoraL, FL 33993	
**************************************	*****
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 re	_
agree to act in this capacity	
1 0 0 111	^ /-
Conne & Myers 2/2	12010
Signature/Registered Agent Dat	¢.
Course & Muers 2/25	12010
Signature/Incorporator Date	te