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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2011 APR 18 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC  
4-19-11

**COVER LETTER**

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

**SUBJECT: Galaxy Financial Group 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: DEBRA DEMOS**

Name (Printed or typed)

**1996 N. CONFERENCE DR**

Address

**BOCA RATON, FL 33486**

City, State & Zip

**561-306-0189**

Daytime Telephone number

**dld0625@att.net** ✓

E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** Galaxy Financial Group Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1996 N. Conference Dr.  
Boca Raton, FL 33486

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is: 100 shares total as divided; Debra Demos 75 shares, Brian Joseph Marcino Jr. 25 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Debra Demos, President/ Shareholder 75 shares  
Address: 1996 N. Conference Dr.  
Boca Raton, FL 33486

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Brian Joseph Marcino Jr. VP/ Shareholder 25 shares  
Address: 1996 N. Conference Dr.  
Boca Raton, FL 33486

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Debra Demos  
Address: 1996 N. Conference Dr.  
Boca Raton, FL 33486

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Debra Demos  
Address: 1996 N. Conference Dr.  
Boca Raton, FL 33486

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

Debra Demos  
Required Signature/Registered Agent

4-11-2011  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Debra Demos  
Required Signature/Incorporator

4-11-2011  
Date

2011 APR 18 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA