

P11 000048846

(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



100207634531

05/20/11--01019--003 **70.00

FILED
11 MAY 20 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 05/24/11

COVER LETTER

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

SUBJECT: GIMAC
(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: Maria E. Ruiz
Name (Printed or typed)

10430 S.W. 145 Ave
Address

Miami Florida 33186
City, State & Zip

305-388-9995
Daytime Telephone number

mariaquiras9@hotmail.com
E-mail address: (to be used for future annual report notification)

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

May 2, 2011

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

Re: P09000015896
GIMAC FINANCIAL ADVISORS INC

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me at 305 595-2407.

Sincerely,



Maria E. Quiros

FILED
11 MAY 20 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

GIMAC FINANCIAL ADVISORS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

10430 S.W. 145 Ave

Miami FL 33186

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

EIN# 26-4509385

ARTICLE IV SHARES

The number of shares of stock is: 100 @ \$1.00 ea.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA E. RUIZ President

Address: 10430 SW 145 Ave

Miami FL 33186

Name and Title:

Address:

Name and Title:

Address:

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: MARIA E. RUIZ

Address: 10430 S.W. 145 Ave

Miami FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIA E. RUIZ

Address: 10430 S.W. 145 Ave

Miami FL 33186

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

Required Signature/Registered Agent

5/2/11

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.

Required Signature/Incorporator

5/2/11

Date