

P12000052930

## Florida Department of State

Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 617-6381

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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CORPORATIONS

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Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
GUIDANCE WEALTH MANAGEMENT CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

DIVISION OF CORPORATIONS

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

**ARTICLE I NAME** GUIDANCE WEALTH MANAGEMENT CORP.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
815 FORSYTH STREET  
BOCA RATON, FL 33487

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 10.00

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

Name and Title: PRESIDENT-RAYMOND FILOBIMO	Name and Title: _____
Address: 815 FORSYTH STREET	Address: _____
BOCA RATON, FL 33487	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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


Name: RAYMOND FILOBIMO  
Address: 815 FORSYTH STREET  
BOCA RATON, FL 33487

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

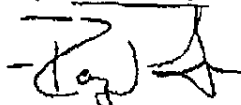
Name: RAYMOND FILOBIMO  
Address: 815 FORSYTH STREET  
BOCA RATON, FL 33487

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

6/11/12  
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

6/11/12  
Date

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BUREAU OF CORPORATE REGISTRATION  
TALLAHASSEE, FLORIDA

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