P120000065669

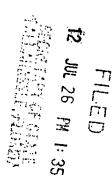
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
-W12-37234				





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07/12/12--01024--007 **87.50



1/4

COVER LETTER

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

SUBJECT:	GMC, CORP			
	(PROPOSED CORPOR ginal and one (1) copy of the ar	ATE NAME - MUST INC		
choised are air on	ginar and one (1) copy of the ar	dictes of incorporation an	u 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 C	OPY REQUIRED	
FROM:	Nam	UDIA TAPIA le (Printed or typed)		
1650 NE 33 AVE,#102 Address				
***	HOMESTEA	ND, FLORIDA 33 , State & Zip	033	
	City	, State & Zip		
	305-245-4963			
	Daytime '	Telephone number		
	claudia067	360@yahoo.com		
	E-mail address: (to be use	ed for future annual report	notification)	

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



July 13, 2012

CLAUDIA TAPIA 1650 NE 33 AVE, #102 HOMESTEAD, FL 33033

SUBJECT: G M C, CORPORATION

Ref. Number: W12000037234

We have received your document for G M C, CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 412A00018769

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

The name of the corpo	MICLAMA, CORF	PORATION	FILED	
ARTICLE II P.	RINCIPAL OFFICE		12 III 26 DV 1. 00	
	Principal street address		dress, if different is!4 1: 35	
	50 NE 33 AVE,#102		FOR AN AND A PARK TO BE TO BE SAID	
HO	MESTEAD, FL 33033		ALLA HASSIE, FLORES	
				
ARTICLE III PU			w	
The purpose for which	ch the corporation is organized is: PROFESSIONAL C	ORPORATION		
ARTICLE IV S. The number of shares	HARES of stock is: 500 SHARES			
ARTICLE V II	NITIAL OFFICERS AND/OR DIRECTOR	S		
	MICHAEL CISNEROS, PRESIDENT			
Address:	1650 NE 33 AVE,#102			
	HOMESTFAD,FL 33033			

Name and Title	CLAUDIA TAPIA SECRETARY	Name and Title:		
Address:	1650 NE 33 AVE #102	Address:		
	HOMESTEAD, FL 33033	•	<u>.</u>	
		<u> </u>		
Name and Title	:	Name and Title:		
Address:				
				
	<u>EGISTERED AGENT</u>			
	la street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name: Address:	CLAUDIA TAPIA	-		
Address:	1650 NE 33 AVE,#102 HOMESTEAD, FL 33033	-		
	LIUNESTEAD, LE 30035	_		
	<u>VCORPORATOR</u>			
	ss of the Incorporator is:			
Name: Address:	CLAUDIA TAPIA 1650 NE 33 AVE #102	-		
Address.	HOMESTEAD, FL33033	-		
	as registered agent to accept service of process familiar with and accept the appointment as reg			
0	X III		07-25-12	
	Required/Signature/Registered Agent		07-21-12 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.				
1/1/-	K. Jej		07. 25-12.	
0	Required Signature/Incorporator		07-25-12- Date	