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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassae, FL 32314

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SUBJECT:GABLE	FUNDING G	ROUP, INC.		코// / 명
		ate name - must include	suffix)	EB 27 PU
Enclosed is an original for : \$70.00 Filing Fee	and one (1) c \$78.75 Filing Fee & Certificate	opy of the articles o \$122.50 Filing Foe & Certified Copy	f incorporation ar \$\incext{x} \\$131.25 Filing Fee, Certified Copy & Certificate	nd a check in
FROM:		vian Gable		
	P.OI	30x 320122 Address		
	FGDGD	Beach, Florida	32932	
		City, State & Zip		
		868-0228		
	Dayti	me Telephone number		

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Gable Funding Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2023 N. Atlantic Avenue, Suite 213 Cocoa Beach, Florida 32931

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares with no par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Vivian Gable 2023 N. Atlantic Avenue, Suite 213 Cocoa Beach, Florida 32931

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Vivian Gable 2023 N. Atlantic Avenue, Suite 213 Cocoa Beach, Florida 32931

The undersigned incorporator(s) has(have) executed these Articles of Inc	orporation this
212 day of Toh, 1995.	
Vienan Hable Signature	
NA Signature	<u> </u>
NA Signature	·

Articles of Incorporation Filing Fee - \$35

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: Gable, Funding Group, Inc.
2	The name and address of the registered agent and office is:
	Vivian Gable (Name)
	2023 N. Atlantic Avenue, Suite 213
	(P.O. Box not acceptable)
	Cocoa Beach, Florida 32931
	(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dinare Hable Thek 21-1995
(Signature) (Date)