

# CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Mailor No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

GLINDS

MAR 16 1995 BSB

REQUEST TAKEN CONFIRMED APPROVED

DATE \_\_\_\_\_

TIME \_\_\_\_\_ CK No. \_\_\_\_\_

BY ST \_\_\_\_\_

WALK-IN Will Pick Up 3-16 11:00

RE: G & M Management, Inc.

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Initial Filing		
<input checked="" type="checkbox"/> Art. of Amend. File		
<input checked="" type="checkbox"/> Dissolution/Withdrawal		
<input checked="" type="checkbox"/> C U S-		
<input checked="" type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ( ) _____		
<input type="checkbox"/> Top Priority _____		
<input type="checkbox"/> Express Mail Prop. _____		
<input type="checkbox"/> FAX ( ) _____ pgs.		

## SUBTOTALS

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit Invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

**ARTICLES OF INCORPORATION**  
**OF**

FILED  
95 MAR 16 AM 9: 54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**G & M MANAGEMENT, INC.**

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

**ARTICLE I: NAME**

The name of the corporation is **G & M MANAGEMENT, INC.**

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation is 1816 Seneca Blvd., Winter Springs, FL 32708.

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of ten cents (\$.10) per share.

#### **ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### **ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### **ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The name and address of the member of the initial Board of Directors of the corporation is Robert K. Law, 1816 Seneca Blvd., Winter Springs, FL 32708.

#### **ARTICLE VII: SPECIAL PROVISION**

The stock of this corporation is subject to, and may not be transferred except in accordance with, the bylaws of the corporation.

The undersigned has executed these Articles of Incorporation this 15th day of March, 1995.



Capital Connection, Inc.

Barbara Neeley - President

Incorporator

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the state of Florida.

1. The name of the corporation is **G & M MANAGEMENT, INC.**
2. The name and address of the registered agent and office is  
**Capital Connection, Inc., 417 E. Virginia St., Suite 1,  
Tallahassee, FL 32301.**

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.



Capital Connection, Inc.

Barbara Neeley - President

Date: March 15, 1995

FILED  
95 MAR 16 AM 9:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

412 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

**P95000021312**

NAME \_\_\_\_\_

FIRM \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

RE: G v M No 51649

management, Inc.

	C.C. FEE.	DISBURSED
Capital Express		
Art. of Inc.		
Corp. Record Search		
Ltd. Partnership File		
Foreign Corp. File		
( ) Cert. Copy(s)		
Art. of Amend. File		
Dissolution/Withdrawal		
C U S -		
Fictitious Name File		

\_\_\_\_\_  
Name Reservation  
\_\_\_\_\_  
Annual Report/Reinstatement  
\_\_\_\_\_  
Reg. Agent Service  
\_\_\_\_\_  
Document Filing

\_\_\_\_\_  
Corporate Kit  
\_\_\_\_\_  
Vehicle Search  
\_\_\_\_\_  
Driving Record  
\_\_\_\_\_  
Document Retrieval

\_\_\_\_\_  
UCC 1 or 3 File  
\_\_\_\_\_  
UCC 11 Search  
\_\_\_\_\_  
UCC 11 Retrieval  
\_\_\_\_\_  
File No.'s, \_\_\_\_\_ Copies

\_\_\_\_\_  
Courier Service  
\_\_\_\_\_  
Shipping/Handling  
\_\_\_\_\_  
Phone ( ) \_\_\_\_\_

\_\_\_\_\_  
Top Priority  
\_\_\_\_\_  
Express Mail Prop.  
\_\_\_\_\_  
FAX ( ) \_\_\_\_\_ pgs.

## SUBTOTALS

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$ 3/21
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts  
Past 30 Days, 18% per Annum.

THANK YOU  
from  
Your Capital Connection

REQUEST TAKEN CONFIRMED APPROVED

DATE \_\_\_\_\_

TIME \_\_\_\_\_ CK No. \_\_\_\_\_

BY SKZ \_\_\_\_\_

WALK-IN 9-20 1:20  
Will Pick Up

ARTICLES OF AMENDMENT  
OF  
G & M MANAGEMENT, INC.

55 MAR 21 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1. The following provisions of the Articles of Incorporation of G & M MANAGEMENT, INC., a Florida corporation, filed in Tallahassee on March 16, 1995, Document Number P95000021312, be and the same are hereby amended in the following particulars:

Article I is hereby amended to read as follows:

"ARTICLE I: NAME

The name of the corporation is GMH ENTERPRISES, INC."

2. The foregoing amendment was adopted on March 17, 1995, by the undersigned as the sole initial director of the corporation, without shareholder action, pursuant to §607.1005, Florida Statutes. Shareholder action was not required because the corporation has not yet issued shares.

IN WITNESS WHEREOF, the undersigned Director of this corporation has executed these Articles of Amendment this 17th day of March, 1995.

G & M MANAGEMENT, INC.

By: *Robert K. Law*

Robert K. Law, Director

STATE OF FLORIDA  
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 17th day of March, 1995, by ROBERT K. LAW, Director of G & M MANAGEMENT, INC., a Florida corporation, on behalf of the corporation. He/she is personally known to me or has produced \_\_\_\_\_ as identification.



DEMETRIOS G. GLINOS  
MY COMMISSION # CC321151 EXPIRES  
November 14, 1997  
BONDED THRU TROY FAIR INSURANCE, INC.

*Demetrios G. Glinos*  
NOTARY PUBLIC, State of Florida  
Name: Demetrios G. Glinos

# P9500002.1312

GMM ENTERPRISES, INC.  
801 N. MAGNOLIA AVE.  
SUITE #1408 ORLANDO  
FL. 32803

400002148954--3  
-04/21/97--01086--020  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RA Chg.

VS MAY 12 1997

FILED  
97 MAY -7 AM 8:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

April 28, 1997

GMH ENTERPRISES, INC.  
801 N. MAGNOLIA AVE., STE. 408  
ORLANDO, FL 32803

SUBJECT: GMH ENTERPRISES, INC.  
Ref. Number: P95000021312

We have received your document for GMH ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return 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 (904) 487-6909.

Velma Shepard  
Corporate Specialist

Letter Number: 397A00021746



**GMH Enterprises, Inc.**

801 N. Magnolia Ave., Suite 408  
Orlando, Fl. 32803  
(407) 481-8670 Fax (407) 481-8671

May 5th, 1997.

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

Attention: Velma Shepard  
Corporate Specialist

Subject: **GMH Enterprises, Inc.**  
Ref: P95000021312  
Your Letter Number: 397A00021746

Dear M/s Shepard

In compliance with your request, we resubmit herewith the application for our new registered agent together with a copy of your subject letter for your reference. If you have any further question regarding the filing of our application, please feel free to contact us at (407) 481-8670.

Thank you for your kind assistance in this matter.

Yours, Sincerely

Michael Hsu  
Vice President  
GMH:mh

RECEIVED

MAY 8 8:36  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

Florida Department of State, Sandra B. Mortham, Secretary of State

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of \_\_\_\_\_ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: GMH ENTERPRISES, INC.

1b. The mailing address of the corporation is: 1816 SENECA BLVD.  
WINTER SPRINGS, FL. 32708

1c. Date of incorporation: MARCH 16, 1995 Document number: P950000 21312

2. The name and address of the current registered agent and office:

CAPITOL CONNECTION INC.  
417 E. VIRGINIA ST. SUITE 1  
TALLAHASSEE, FL. 32301

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

LAW FAMILY INVESTMENTS, INC.  
801 NORTH MAGNOLIA AVENUE, SUITE 408  
ORLANDO, FL 32803

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Michael Asu  
(Signature of an officer, chairman or  
vice chairman of the board)

MAY 1ST 1997  
(Date)

MICHAEL ASU (VICE PRESIDENT)  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature]  
(Signature of Registered Agent)

May 1, 97  
(Date)

If signing on behalf of an entity:

ROBERT LAW  
(Typed or Printed Name)

VICE PRESIDENT  
(Capacity)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILED  
97 MAY -7 AM 8:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA