# P96000056914

| _         | CERT, F<br>366 N.<br>JERICHO | PUBLIC AC<br>BROADWAY<br>), NY 11 | GUIDICE PC<br>COUNTANTS<br>SUITE 317<br>753 |             |               | L4HASSEE, FLOR    | 现 -2 组8:        | FILED                     |
|-----------|------------------------------|-----------------------------------|---|-------------|---------------|-------------------|-----------------|---------------------------|
|           | City/State                   | /Zip                              | Phone #                                     |             | Off           | Tice Use Only     | 37              |                           |
| CORP      | ORATION                      | NAME(S)                           | & DOCUMENT                                  | r numbei    | R(S), (if kno | own):             |                 |                           |
| 1         | (Con                         | poration Name)                    |   | (Docume     | nt #)         | 90000<br>-07/03/9 | 0188<br>6==0101 | 32569<br>1001<br>***78.75 |
| 2.        |                              |                                   |   | ·           | ·             |                   | (3 ###<br>(5)   | ₩#78.7S                   |
|           | (Corporation Name)           |                                   |   |             | nt#)          |                   | <del></del>     |                           |
| 3         | (Соп                         | oration Name)                     |   | (Docume     | nt #)         |                   | <del></del>     |                           |
| 4         | (Cor                         | oration Name)                     |   | (Documer    | nt #)         |                   | <del></del>     |                           |
| □ wal     | kin [                        |                                   | me  |             | Certified     | • •               |                 |                           |
| NEW FILI  | NGS                          | AM                                | ENDMENTS                                    | SHIEVEN.    | ]             |                   |                 |                           |
| Profit    |                              |                                   | dment                                       |             | 1             |                   |                 |                           |
| NonProfit |                              | Resig                             | nation of R.A., Office                      | r/ Director |               |                   |                 |                           |

| 類 | OTHER FILINGS    |
|---|------------------|
|   | Annual Report    |
|   | Fictitious Name  |
|   | Name Reservation |

Limited Liability

Domestication

Other

|   | REGISTRATION/       |
|---|---------------------|
|   | Foreign             |
|   | Limited Partnership |
|   | Reinstatement       |
|   | Trademark           |
| Ĺ | Other               |

Change of Registered Agent

Dissolution/Withdrawal

Merger

Examiner's Initials NC 7-8-96

### .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:

TGMB Financial Services Inc.

96 JUL -2 AN 8: 3
SECHELARY OF STAT
TAILAHASSEE, FLORE

ARTICLE II PRINCIPAL OFFICE

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

700 Shore RJ 27 Cony Beach Nor 11561

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Anthony Cuidice 3300 NE 36th ST APT 808 FONT CAULINGALE Fla 33308

#### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Anthony Guidice 700 Shore Rt 25 Long Beach MT 11561

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

### Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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. | 1. The name of the corporation is: TGMB Financial Ser                | ujies Zni                                    |
|----|--|--|
| 2. | The name and address of the registered agent and office is:          |  |
|    | Anthony Guidice  | 96 JU<br>SECRE<br>TALLAH                     |
|    | 3300 NE 36 Th ST NOT SUP  (P.O. Box or Mail Drop Box NOT ACCEPTABLE) | TILED<br>JUL -2 A<br>RETARN OF<br>AHASSEE, F |
|    | FOIT LUNDER JULE F/4 3230P (CITY/STATE/ZIP)                          | )<br>1 8:36<br>STATE<br>LORIDA               |

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.

(SIGNATURE) (DATE)

CON Spiny Ma 33062

# P86000056914

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To world like to change the address of the above of the address of the for both the principal office and registered agest.

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# P96000056914

Office Use Only

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

|    | 1                       | Corpora | ation Name)           |                               | (Document #)                 |                       |  |  |
|----|-------------------------|---------|-----------------------|-------------------------------|------------------------------|-----------------------|--|--|
|    | 2                       | •       | ntion Name)           |                               |                              |                       |  |  |
|    | •                       |         | ntion Nume)           | ·                             | (Docume                      | nt #)                 | <del></del>                            |  |
|    | 4(0                     | :orpora | tion Name)            |                               | (Docume                      | nt #)                 | ······································ |  |
|    | ☐ Walk in               |         | Pick up time          |                               |                              | Certified Copy        |  |  |
|    | Mail out                |         | Will wait             | Photocop                      | py (                         | Certificate of Status |  |  |
| ٠. | NEW FILINGS             | 7 [2    | AMEN                  | DMENTS                        | , a distriction<br>geography | ,                     |  |  |
|    | Profit                  | 7 [     | Amendme               | nt                            |                              |                       | 1                                      |  |
|    | NonProfit               |         | Resignation           | on of R.A., Officer/          | Director                     | 5                     | ٦١                                     |  |
|    | Limited Liability       |         | Change of             | Registered Agent              |                              |                       | 223                                    |  |
|    | Domestication           | ][      | Dissolutio            | Dissolution/Withdrawal 9/ 11  |                              |                       |  |  |
|    | Other                   | ][      | Merger                |                               |                              | ] <b>分</b> 伤言         | 0 73 9:40                              |  |
|    | In or Ellor carvulateo€ | 7 🕝     | Company of the second | an karan tana da Kababaran La |                              | 00                    | <u></u>                                |  |
| 7% | OTHER FILINGS           |         |                       | STRATION/                     | 10 P                         | -                     |  |  |
|    | Annual Report           | ╛┞      | <del></del>           | LIFICATION %                  | 4                            |                       |  |  |
|    | Fictitious Name         | ┧┝      | Foreign               |                               | -                            |                       |  |  |
|    | 1 m                     | 1 !     | Limited Pa            | ırıncısnıp                    | 1                            |                       |  |  |

Reinstatement
Trademark
Other

Examiner's Initials

Name Reservation

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

6.14

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

| Pursuant to the provisions of sections 607,0502, cuidersigned corporation organized under the laws of   | 617.0502, 607.1508, or 617.1508, Florida Statutes, the of the State of  |
|---|---|
|   | its registered office or registered agent, or both, in the  |
| State of Florida.   |   |
| 1. The name of the corporation is: $\frac{7 + 27 + 3}{3}$   | A large of the same of the  |
| A 791 112 1 1 7 1   |   |
| 2. The mailing address of the corporation is:   |   |
|   |   |
| <ul> <li>3. Date of incorporation/qualification:</li> <li>4. The name and address of the current registered a</li> </ul>  | gent and office:  |
| Markey (  | •   |
| <u> </u>  | 21 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |
| track to be to take   | El Park   |
| 5. The name and address of the new registered agen  |   |
| 1 July Cont.  | (   |
| 6, 5% C-1101 K  |   |
| ( u/ 1/1 1/2  | 73 - C  |
| The street address of its registered office and the stragent, as changed, will be identical.  |   |
| Such change was authorized by resolution duly adopathorized by the board.   |   |
| aumorized by the board.   | 9/14/96   |
| Signature of an officer, chairman or vice chairman of the board)  | (Date)  |
| Porthung 600  | ed name and title)  |
|   |   |
| Having been named as registered agent and to acce<br>hereby accept the appointment as registered agent<br>comply with the provisions of all statutes relative to<br>and I am familiar with and accept the obligation of | pt service of process for the above stated corporation,<br>and agree to act in this capacity. I further agree to<br>the proper and complete performance of my duties,<br>my position as registered agent. |
|   | 8/10/4/   |
| (Signature of Registered Agent)   | (Date)  |
| If signing on behalf of an entity:  |   |
| Broken Com  | Franker.  |
| (Typed or Printed Name)   | (Capacity)  |

**FILING FEE: \$35.00** 

CR2E045(1-95)