

P97000104296  
TRANSMITTAL LETTER

FIRST CHOICE

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

SUBJECT: GABLES MARKETING GROUP, INC.  
(Proposed corporate name - must include suffix)

FILED  
97 DEC 11 AM 10:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: ALLEN RUBIN  
Name (Printed or typed)

8000002370248-5  
-12/12/97-01013-028  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

3545 PALMETTO AVENUE  
Address

COCONUT GROVE, FLORIDA, 33133  
City, State & Zip

(305) 774-0030  
Daytime Telephone number

B. McKnight DEC 11 1997

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

## ARTICLES OF INCORPORATION

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 shall be:

GABLES MARKETING GROUP, INC.

### ARTICLE II PRINCIPAL OFFICE

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

3399 PONCE DE LEON BLVD.,  
SUITE # 206,  
CORAL GABLES, FLORIDA, 33134

### ARTICLE III SHARES

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

1,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

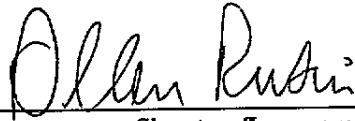
The name and Florida street address of the initial registered agent are:

NICK MUSSO  
11350 N.W. 23rd ST.,  
PLANTATION, FL, 33323

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ALLEN RUBIN  
3545 PALMETTO AVE.,  
COCONUT GROVE, FL., 33133



Signature/Incorporator

DEC. 2nd, 1997

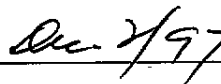
Date

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

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/Registered Agent



Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

97 DEC 11 AM 10:21

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