

P07000075/36

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2001 JUN 13 A 10:33

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D. WHITE JUN 29 2007

**COVER LETTER**

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

SUBJECT: Lending Mortgage Services, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Fernando Isola  
Name (Printed or typed)

2970 NW 15 St.  
Address

Miami, FL 33125  
City, State & Zip

786-443-4226  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

Lending Mortgage Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

2970 n.w 15 st.  
Miami, Fl 33125

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Mortgage Services

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Fernando A. Isola

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Fernando A. Isola  
2970 n.w 15 st.  
Miami, Fl 33125

**ARTICLE VII INCORPORATOR**

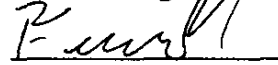
The name and address of the Incorporator is:

Fernando A. Isola  
2970 n.w 15 st.  
Miami, Fl 33125

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

6-11-07  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

6-11-07  
\_\_\_\_\_  
Date

**FILED**

2007 JUN 13 A 10: 33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA