

**ALSO0005487**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
AMERIPRO MORTGAGE PROCESSING CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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FILED  
15 JUN 30 AM 8:28  
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15 JUN 30 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

AmeriPro Mortgage Processing Corp.

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

Marilyn Perez  
13454 SW 62 St, #0108  
Miami, FL 33183

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Marilyn Perez (P)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Marilyn Perez  
13454 SW 62 St #0108  
Miami, FL 33183


**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

Marilyn Perez  
13454 SW 62 St #0108  
Miami, FL 33183

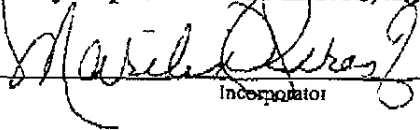
H15000160721

**Required Signatures:**

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

 _____ Registered Agent	_____ 6/29/15 Date
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I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 _____ Incorporator	_____ 6/29/15 Date
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