

TRANSMITTAL LETTER

P98000072559

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

300002617793--8
-08/17/98-01109-003
*****78.75 *****78.75

SUBJECT: Tri-Mega Lending Corporation
(Proposed corporate name - must include suffix)

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:

Chad K. Litzke

Name (Printed or typed)

4461 BEVERLY AVE.

Address

JACKSONVILLE, FL 32210

City, State & Zip

904-307-7189

Daytime Telephone number

FILED
98 AUG 17 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. CHESSEY AUG 19 1998

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:

Tri-Mega Lending Corporation

ARTICLE II PRINCIPAL OFFICE

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

4461 Beverly Avenue
Jacksonville FL 32210

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

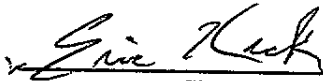
The name and Florida street address of the initial registered agent are:

CHAD KLITZKE
4461 BEVERLY AVE
JACKSONVILLE, FL 32210

ARTICLE V INCORPORATOR

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

Erce C. Keck
4461 Beverly Ave
Jacksonville, FL 32210



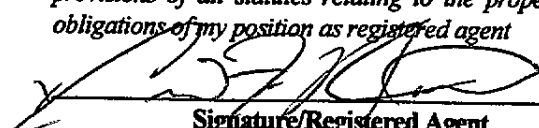
Signature/Incorporator

8-7-98

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

8/7/98

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA