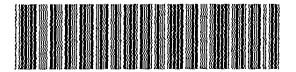
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## TRANSMITTAL LETTER

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

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

## In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Mortage Processing, PRINCIPAL OFFICE ARTICLE II SE 26th St, Cape Coral, Fl 33904 The principal place of business/mailing address is: ARTICLE III **PURPOSE** loan applications The purpose for which the corporation is organized is: Mortgage ARTICLE IV The number of shares of stock is: 100 INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Coral, Il 33904 REGISTERED AGENT The name and Florida street address of the registered agent is: Coral, &C 33904 it St, Cape ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Coral, FL 33904 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

ARTICLES OF INCORPORATION

Signature/Incorporator