

ND50000007152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

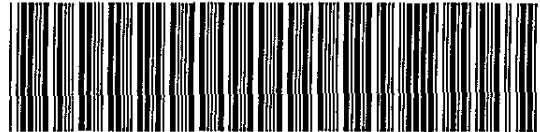
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Special Instructions to Filing Officer:

Peter L. Lopez GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Article IV  
DATE 7/14/05  
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TALLAHASSEE, FLORIDA  
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7/14

## TRANSMITTAL LETTER

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

**SUBJECT:** Mortgage Angels, Inc.

(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 of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Peter L. Lopez, CPA

Name (Printed or typed)

25100 Sandhill Blvd, Suite Y - 103

Address

Punta Gorda, FL 33983

City, State & Zip

(239) 464-5476

Daytime Telephone number

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

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Mortgage Angels, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

4050 SW 84th Terrace  
Davie, FL 33328

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide financial assistance to families in need to protect homeownership and enhance their overall quality of life.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

Directors are elected by the board.

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

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

Theresa Zuccarello  
4050 SW 84th Terrace  
Davie, FL 33328

Chairman and Executive Director

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Peter L. Lopez, CPA  
25100 Sandhill Blvd, Suite Y-103  
Punta Gorda, FL 33328

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Peter L. Lopez, CPA  
25100 Sandhill Blvd, Suite Y-103  
Punta Gorda, FL 33328

\*\*\*\*\*

*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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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