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EXPRESS CORPORATE FILING SERVICE, INC
(Requestor's Name)

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CORAL GABLES, FL 33134 (305)444-4994
(City, State, Zip) (Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Banker's Choice Capital Lending Group, Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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Certificate of Status

00 FEB 24 AM 11:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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*****78.75 *****78.75

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

5/11
2/22

DEPARTMENT OF STATE
DIVISION OF CORPORATE
TALLAHASSEE FLORIDA

00 FEB 22 AM 11:42
RECEIVED

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 22, 2000

EXPRESS CORPORATE FILING SERVICE
1000 PONCE DE LEON BLVD.
STE 112
CORAL GABLES, FL 33134

SUBJECT: BANKER'S CHOICE CAPITAL LENDING GROUP, INC.
Ref. Number: W00000004855

We have received your document for BANKER'S CHOICE CAPITAL LENDING GROUP, INC.. However, the document has not been filed and is being returned for the following:

Written approval and clearance of the terms BANK, BANKER, BANC, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION must be obtained from the Division of Banking and Finance, pursuant to section 655.922(2a), Florida Statutes. The address is:

Division of Banking
Director's Office
101 E. Gaines St.
Fletcher Bldg., 6th Floor.
Tallahassee, FL 32399-0350
(850) 410-9111.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 500A00009499

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 FEB 24 AM 11:13

RECEIVED

ARTICLES OF INCORPORATION

FILED
00 FEB 24 AM 11:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I, NAME

The name of this corporation is Capital Lending Group, Inc.

ARTICLE II, NATURE OF BUSINESS

Capital Lending Group, Inc. is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

ARTICLE III, TERM OF EXISTENCE

The duration of Capital Lending Group, Inc. is perpetual.

ARTICLE IV, CAPITAL STOCK

Capital Lending Group, Inc. is authorized to issue 100 shares of common stock, par value \$1.00 per share.

ARTICLE V, ADDRESS

The principle address of Capital Lending Group, Inc. is:

2588 SW 27th Ave
Miami, FL 33131

and the name of the initial registered agent of this corporation at this address is Alberto Cobo.

ARTICLE VI, INITIAL DIRECTORS

Capital Lending Group, Inc. shall have One (1) director, and the number of directors may be changes as provided in the bylaws, but shall never be less than one. The name and address of the initial director is:

Alberto Cobo	President
6300 SW 149th Ct	Director
Miami, Fl 33193	

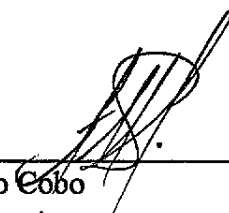
ARTICLE VII, INCORPORATOR

The name and address of the incorporator of this corporation is:

Alberto Cobo
6300 SW 149th Ct
Miami, FL 33193

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation this 16th. day of February, 2000.

STATE OF FLORIDA)
)
COUNTY OF DADE)



Alberto Cobo
Incorporator

Before me, a notary public authorized take acknowledgments in the state and county seats above, personally appeared Alberto Cobo , known to me and known by me to be the person(s) who executed the foregoing Articles of Incorporation, and the acknowledge before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this 16th day of February of 2000.

NOTARY PUBLIC
STATE OF FLORIDA AT LARGE

My Commission Expires:

ACCEPTANCE OF APPOINTMENT

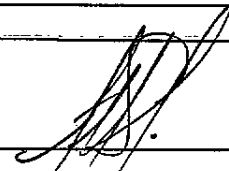
OF

REGISTERED AGENT

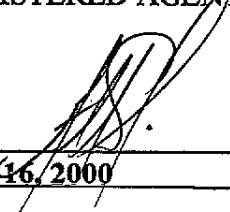
Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Capital Lending Group, Inc.

2. The name and address of the registered agent and office is:
Alberto Cobo
6300 SW 149th Ct
Miami, Fl 33193

SIGNATURE 
TITLE President
DATE February 16, 2000

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 THE CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION 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 
DATE February 16, 2000

FILED
00 FEB 24 AM 11:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA