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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FILED
00 MAR 21 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

S & G MORTGAGE LOANS CORP.

Certificate of Status	0
Certified Copy	1
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ARTICLE OF INCORPORATION

OF

S & G MORTGAGE LOANS CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: S & G MORTGAGE LOANS CORP.

The principal place of business of this corporation shall be:

2338 SW. 19 Terrace
Miami, Fl. 33145

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 X \$10.00 = \$1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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TALLAHASSEE, FLORIDA

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

SILVIA M. SORONDO	DIRECTOR
2338 SW. 19 TERR.	
MIAMI, FLORIDA 33145	

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

SILVIA M. SORONDO	PRESIDENT, SECRETARY & TREASURER
2338 SW. 19 TERR.	100 shares
MIAMI, FLORIDA 33145	

The undersigned has(have) executed these Article of Incorporation this 15 th. day of March, 2000.

Silvia M. Sorondo / President
Signature/Title

Silvia M. Sorondo
Signature/Title

Silvia M. Sorondo
Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:_____

S & G MORTGAGE LOANS CORP.

2. The name and address of the registered agent and office is _____
(Name)

SILVIA M. SORONDO
2338 SW. 19 TERRACE

(P. O. BOX NOT ACCEPTABLE)

MIAMI, FLORIDA 33145

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE _____

DATE _____

Silvia M. Sorondo
3/15/2000