

P0000000692164

TRANSMITTAL LETTER

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 JUL 17 PM 12:05

SUBJECT: ABC Mortgage Services Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900003325359--3  
-07/17/00--01133--010  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of  
Status  
ADDITIONAL COPY REQUIRED

FROM: John F. Gerdon  
Name (Printed or typed)

3500 SW 2nd Ave, STE 1  
Address

Gainesville, FL 32607  
City, State & Zip

(352) 377-6364  
Daytime Telephone number

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

g 7/20/00

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: *ABC Mortgage Services, Inc.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: *3500 SW 2nd Ave, STE 1  
Gainesville, FL 32607*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: *Mortgage lending*

**ARTICLE IV SHARES**

The number of shares of stock is: *1000 (one thousand)*

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is: *John F. Gerdon  
3500 SW 2nd Ave, STE 1  
Gainesville, FL 32607*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: *John F. Gerdon  
3500 SW 2nd Ave, STE 1  
Gainesville, FL 32607*

\*\*\*\*\*  
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

*John F. Gerdon*  
\_\_\_\_\_  
Signature/Registered Agent

*7-14-00*  
\_\_\_\_\_  
Date

*John F. Gerdon*  
\_\_\_\_\_  
Signature/Incorporator

*7-14-00*  
\_\_\_\_\_  
Date

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