CCCCCCCC/522

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

900003350239--5 -08/09/00--01001--025 *****87.50 *****87.50

SUBJECT: Florida Processing Sol Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 \$78.75 □ \$78.75 **🌣** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIREÐ Cartagena AveSE

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

8/8/00

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	E 1
The name of the corporation shall be:	W THE
Florida Processing Solutions Inc.	The second secon
ARTICLE II PRINCIPAL OFFICE	37
The principal place of business/mailing address is:	
2531 Cartagera Ave SE	
Finyers FL 33905	The Community of the Co
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	TETAL CONTRACTOR CONTR
Loan Processing	
ARTICLE IV SHARES	_
The number of shares of stock is:	en de la companya de La companya de la co
100	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional	<u>D</u>
The name(s) and address(es): Tami Carr P michael Ruth	V
Tami Carr -P Michael RUTH	A. E.E
7331 Cartagena Ave SE 2531 Cartagena FIMYERS FL33905 FIMYERS FL3	2390 - Commission
Fimyers FL33905 Fimyers FL3	29 703
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	A CONTRACT OF THE CONTRACT OF
Tami Carr	
2531 Cartagena Ave SE	
FMyers F233905	And the second s
ARTICLE VII INCORPORATOR	ا منظم المستقدم المستقد المستقدم المستقدم المستقدم المستقدم المستقدم المستقدم المستقدم المستقدم المستقدم المستق المستقدم المستقدم ا
The <u>name and address</u> of the Incorporator is:	e company and a second
Tami Carr	To the state of t
2531 Cartagena AVE SE	
Ff myers FL 33905	*************
Having been named as registered agent to accept service of process for the ab certificate, I am familiar with and accept the appointment as registered agent to	bove stated corporation at the place designated in this
	21 /
	シ/フ/ぬり
Inni Care	<u>8/, //00</u>
Signature/Registered Agent	Date
	Date 2/7/00
Signature/Registered Agent Signature/Incorporator	Date 2/7/00 Date

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