## P0/000046487

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 SUBJECT: Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: GASPARE CRES CENTE
Name (Printed or typed)

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

C 905/9,N

'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:			•-
AMERICAN MONTGAGE PLUS INC'		TAS CI	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  9125 Charm LP		MAY -9 PH ECRETARY OF LLAHASSEE,	APPROVI
PORT Richay 1=1 34668		PH 1:51	Ü
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:		AIDA AITE	
INSURANCE SALES			
ARTICLE IV SHARES The number of shares of stock is:  /00			
ARTICLE V INITIAL OFFICERS (DIRECTORS (optional) The name(s) and address(es):			
GASPARE CRES conte Pres.			
9125 ChATAM LN			
Port Richey Pl 34668			
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:  6AS PARE CRES CONCE  9(25 Chatam Lif  PORT LICLEY F1 34668			·
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:			
9/25 ChATAM LA			
PORT Richen Pl 34668			
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Having been named as registered agent to accept service of process for the above stated co- certificate, I am familiar with and accept the appointment as registered agent and agree to c	rporation at the p act in this capacit	olace designated i y	n this
Dayon (us cento	5 h	01	
Signature/Registered Agent	Date	<del></del>	
Layan My Cento	5 79	101	
Signature/Incorporator	Date	<u>. · · · · · · · · · · · · · · · · · · ·</u>	ale :