

TRANSMITTAL LETTER

P01000050552

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

500004215975--1

-05/14/01--01136--021

\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: K.C.R. MORTGAGE PROFESSIONALS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: DEBRA L. KROLL  
Name (Printed or typed)  
2229 W. HILLSBORO BLVD  
Address  
DEERFIELD BEACH, FL 33442  
City, State & Zip  
954-420-0089  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAY 14 AM 10:10

FILED

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

✓ L. Burch MAY 22 2001

# 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:

KCR. MORTGAGE PROFESSIONALS, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2229 W. HILLSBORO BLVD  
DEERFIELD BEACH FL 33442

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MORTGAGE BROKERAGE BUSINESS

## ARTICLE IV SHARES

The number of shares of stock is: 1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

DEBRA L. KROLL 100% OWNER.  
4500 BRIARCLIFF LANE  
COCONUT CREEK FL 33066

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

DEBRA L. KROLL  
4500 BRIARCLIFF LANE  
COCONUT CREEK, FL 33066

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DEBRA L. KROLL  
4500 BRIARCLIFF LANE  
COCONUT CREEK, FL 33066

\*\*\*\*\*  
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

Signature/Registered Agent

Signature/Incorporator

Date

Date

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

01 MAY 14 AM 10:10

FILED

5-8-01

5-8-01