

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

P. O. Box 6327 Tallahassee, FL 32314	- 	•	•		
SUBJECT:	PROPOSED CORPORATE	DOM ENAME – <u>MUST INCLUE</u>	INC. DE SUFFIX)	·	
			:000004468 -07/11/01 ******70.00	·01023015	
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		
		ADDITIONAL CO	PY REQUIRED		
FROM:	Sheri S Name (Prin 11555 Kely Adj	Shaw ted or typed) Yn Grove F	· }/.	OI JUL I SECRETA TALLAHAS	
SSRY — EFT					

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME The name of the corporation shall be: Home A Loan, Inctal	JULII AM 9:52 ECRETARY OF STATE LLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 11555 Kelvyn Grove P1. Jackson Ville, Ft. 32225	en e
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Mortgage - loan processing	
ARTICLE IV SHARES The number of shares of stock is: 5,000.	· · · · · · · · · · · · · · · · · · ·
ARTICLE V INITIAL OFFICERS DIRECTORS (options) The name(s) and address(es): Sheri Shaw 11555 Kelvyn Grove Pl. Jackson ville, FL. 32225	<u>ai)</u>
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
Sheri Shaw 11555 Kelvyn Grove Pl. Jacksonville, Fl. 32255 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Sheri Shaw 11555 Kelvyn Grove Pl.	
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certificate, I am familiar with and accept the appointment as registered agent and a Signature/Registered Agent	agree to act in this capacity 7/9/61 Date
Signature/Incorporator Sheri Shaw	7/9/81 Date