

TRANSMITTAL LETTER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: Mortgage Doctor, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Peter Tarangelo
Name (Printed or typed)

117 Bent Tree Drive
Address

Palm Beach Gardens, FL 33418
City, State & Zip

561-624-7242
Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

MORTGAGE Doctor, INC

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

117 BENT TREE DRIVE
Palm Beach Gardens, FL 33418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mortgage Broker Business

ARTICLE IV SHARES

The number of shares of stock is:

100 shares @ NO PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

PETER TARANGELO
OFFICER
117 BENT TREE DRIVE
PALM BEACH GARDENS, FL 33418

ARTICLE VI REGISTERED AGENT

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

PETER TARANGELO
117 BENT TREE DRIVE
PALM BEACH GARDENS, FL 33418

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PETER TARANGELO
117 BENT TREE DRIVE
PALM BEACH GARDENS, FL 33418

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

Peter Tarangelo
Signature/Registered Agent

11-8-01
Date

Peter Tarangelo
Signature/Incorporator

11-8-01
Date