

PO 1000110637

TRANSMITTAL LETTER

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

SUBJECT: CPC MORTGAGE ENTERPRISES INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004621233--5  
-10/03/01--01025--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: SHARON CAMERON  
Name (Printed or typed)

RT 3, BOX 529-F  
Address

STARKE, FL. 32091  
City, State & Zip

352-468-1195  
Daytime Telephone number

FILED  
2001 NOV 19 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Wol-23053  
11/19 10/4  
BC/SP



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

October 4, 2001

SHARON CAMERON  
RT 3, BOX 529-F  
STARKE, FL 32091

SUBJECT: C & C MORTGAGE ENTERPRISES INC.  
Ref. Number: W01000023053

We have received your document for C & C MORTGAGE ENTERPRISES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum  
Document Specialist  
New Filing Section

Letter Number: 201A00055764

# 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:

C & C MORTGAGE ENTERPRISES INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

RT 3, BOX 529-F  
STARKE, FL. 32091

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MORTGAGE ORIGINATION FEES

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

SHARON S. CAMERON  
RT 3, BOX 529-F  
STARKE, FL. 32091

## ARTICLE VI REGISTERED AGENT

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

1070-S S.E. 49TH AVE.  
STARKE, FL. 32091

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHARON CAMERON  
RT 3, BOX 529-F  
STARKE, FL. 32091

\*\*\*\*\*

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

Date

8/20/01

Signature/Incorporator

Date

10/31/01

FILED  
2001 NOV 19 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA