

## Florida Department of State

#### Division of Corporations

Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346 SECKETALY OF SIAPONATIONS
DIVISION OF CORPORATIONS

## FLORIDA PROFIT CORPORATION OR P.A.

JABEZ 53, INC.

Certificate of Status	0	
Certified Copy	1	
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#### ARTICLES OF INCORPORATION

of

# JABEZ 53, INC. (name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

#### ARTICLE I- CORPORATE NAME

The name of the corporation is:

JABEZ 53, INC.

#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida Law.

#### ARTICLE III - PURPOSE

The corporation is organized for the purpose of operating as mortgage broker.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue five hundred shares (500) of one dollar (S) (1:00) par value Common Stock, which shall be designated "Common Shares."

### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial Registered Agent office and the name of the Initial Registered Agent at that office are:

NAME

CLELIA C. KONDO

ADDRESS

4321 S. LANDAR DRIVE

CITY

LAKE WORTH, FLORIDA 33463

	,
The princ	ipal office, if known or the mailing address rporation is:
NAME ADDRESS CITY	JABEZ 53, INC. 4321 S. LANDAR DRIVE LAKE WORTH, FLORIDA 33463
<u>2</u>	ARTICLE VI - INITIAL BOARD OF DIRECTORS
initially increased laws, but and addre	oration shall have ONE (1) director(s). The number of directors may be either or diminished from time to time by the byshall never be less than one (1). The names sses of the initial director(s) of the on are as follow:
NAME ADDRESS CITY	CLELIA C. KONDO 4321 S. LANDAR DRIVE LAKE WORTH, FLORIDA 33463
NAME ADDRESS CITY	FLORIDA ZIF
NAME ADDRESS CITY	FLORIDA ZIP
NAME ADDRESS CITY	FLORIDA ZIP
	ARTICLE VII - INCORPORATORS
The names these Art:	and addresses of the incorporates signing icles of Incorporation are as follows:
NAME ADDRESS CITY	CLELIA C. KONDO 4321 S. LANDAR DRIVE LAKE WORTH, FLORIDA 33463
NAME ADDRESS	

FLORIDA ZIP

CITY

## HO2000136059 1

NAME ADDRESS CITY	FLORIDA ZIP	
NAME ADDRESS CITY	FLORIDA ZIP	
IN WITNESS WHI have executed DAY OF MAY of	REOF, the undersigned and subscriber(sthese Articles of Incorporation this 72002.	5 <b>)</b> 7 <b>T</b> †
	(Seal)	
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## CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

JABEZ 53, INC. (Name Corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

At:

JABEZ 53, INC.

4321 S. LANDAR DRIVE

LAKE WORTH, FLORIDA 33463

Has named \_\_\_\_\_ CLELIA C. KONDO

Located at the aforesaid address, as its Registered Agent to accept service of process within this state.

#### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept services of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

 ${\it REGISTERED}$   ${\it AGENT}$