

PO3000006651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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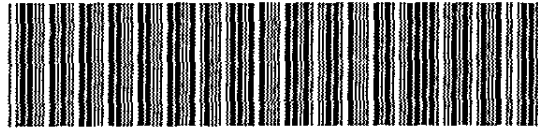
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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TRANSMITTAL LETTER

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

SUBJECT: PHD MORTGAGE COMPANY
(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: MICHAEL D. FINN
Name (Printed or typed)

208 BOARDWALK PL E
Address

MADRIDA BEACH FL 33708
City, State & Zip

727-392-2255
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:

PHD MORTGAGE COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

208 BOARDWALK PL E
MADRIRA BRACH FL 33708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MORTGAGE COMPANY AND
ALL ACTS CONSISTANT THEREWITH.

ARTICLE IV SHARES

The number of shares of stock is:

TEN THOUSAND (10,000) SHARES
OF COMMON

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MICHAEL D. FINN
12274 1ST ST W # 3

VICE PRES & TREAS.
TREAS ISLAND FL 33706

ALEXANDER B. COLETTI
582 JOHN'S PASS AVE

PRES & SECRETARY
MADRIRA BCH FL 33708

ARTICLE VI REGISTERED AGENT

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

MICHAEL D. FINN
208 BOARDWALK PL E
MADRIRA BCH FL 33708

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALEXANDER B. COLETTI
582 JOHN'S PASS AVE
MADRIRA BRACH FL 33708

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

Signature/Incorporator

Date

FILED
STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FL
03 JAN 13 AM 8:03