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## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

: NATIONS BUSINESS CENTER, INC. Account Name

Account Number : I20000000238 Phone

: (305)591-9448

Fax Number

: (954)753-3447

### FLORIDA PROFIT CORPORATION OR P.A.

VICTORIA CASSO P.A.

D. WHITE FEB 1 1 2003

Certificate of Status	_0
Certified Copy	1
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SECRETOR OF STATE
TALLAHASSEE FIGURES

(HO30000468519)

#### ARTICLES OF INCORPORATION

TO: SECRETARY OF STATE, STATE OF FLORIDA, TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the Corporation shall be:

#### VICTORIA CASSO P.A.

The principal place of business of this corporation shall be:

11131 HERON BAY BLVD #4722

CORAL SPRINGS, FL 33076

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in mortgage broker business permitted under the laws of the United State, the State of Florida, or any other State, Country, Territory, or Nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1000.

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#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address (es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are): Victoria Casso whom resides at 11131 Heron Bay Blvd #4722 Coral Springs, FL 33076.

#### ARTICLE VI INCORPORATOR(S)

The names(s) and street address (es) of the incorporator(s) to these articles of incorporation is (are): Victoria Casso whom resides at 11131 Heron Bay Blvd. #4722 Coral Springs, FL 33076.

Signature(s) of Incorporator(s)

Victoria Casso Incorporator/President

(HO30000468519)



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the Undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation: VICTORIA CASSO P.A.
- 2. The name and address of the registered agent and office is:

Victoria Casso 11131 Heron Bay Blvd. #4722 Coral Springs, FL 33076

SIGNATURE: Subsidiar
TITLE: Incorporator/Registered Agent
Date: 2/7/03

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE:	Refrie Cus
Date:	A/7/63

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