

P03000022057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

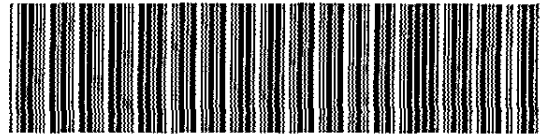
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 FEB 26 PM 4:45  
ILLINOIS  
DEPT OF STATE  
CORPORATIONS

2-24-03

## TRANSMITTAL LETTER

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

SUBJECT: Statiwide Foreclosures, 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:

P B: A Financial Svcs.

Name (Printed or typed)

13935 NW 1st Ave

Address

Miami, FL 33168

City, State & Zip

305-688-9694

Daytime Telephone number

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

**ARTICLES OF INCORPORATION  
OF  
STATEWIDE FORECLOSURES, INC.**

We, the undersigned, all of whom are of legal age, do hereby associate ourselves for the purpose of becoming a corporation under the laws of the State of Florida authorizing the formation of corporations.

**ARTICLE I**

The name of this corporation shall be:

STATEWIDE FORECLOSURES, INC.

**ARTICLE II**

The purpose is to engage in any activities or business permitted under the laws of the United States and the State of Florida.

**ARTICLE III**

It shall have the authority to issue 100 shares of stock, all of one class, with \$ 1.00 par value.

**ARTICLE IV**

The corporation shall begin with \$ 100.00 capital.

**ARTICLE V**

The period of its duration is perpetual.

**ARTICLE VI**

The address of its principal office is:

13935 NW 1<sup>st</sup> Ave  
Miami, FL 33168

Prepared by:  
PB&A Financial Services, Corp.  
13935 NW 1st Avenue  
Miami, FL 33168  
(305) 688-9694

FILED  
STATE OF FLORIDA  
COUNTY OF COCORONIS  
03 FEB 24 PM 4:45

## **ARTICLE VII**

The number of directors constituting its initial Board of Directors is  
(1) whose name(s) and address(es) is (are):

Sandra Arguello  
13935 NW 1<sup>st</sup> Ave  
Miami, FL. 33168  
President

## **ARTICLE VIII**

The name and address of the subscriber is:

Sandra Arguello  
13935 NW 1<sup>st</sup> Ave  
Miami, FL. 33168

## **ARTICLE IX**

The registered agent and registered office for the corporation shall  
be:

PB&A FINANCIAL SERVICES,C ORP.  
13935 NW 1st AVENUE  
MIAMI, FL. 33168

## **ARTICLE X**

Shareholders shall be entitled to preemptive rights.


  
Sandra Arguello

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED.**

**IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE  
FOLLOWING IS SUBMITTED:**

**FIRST THAT STATEWIDE FORECLOSURES, INC. DESIRING TO ORGANIZE  
OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS  
PRINCIPAL PLACE OF BUSINESS AT CITY OF MIAMI, STATE OF FLORIDA  
HAS NAMED PB&A FINANCIAL SERVICES, CORP. AS ITS AGENT TO  
ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.**

Signature: \_\_\_\_\_

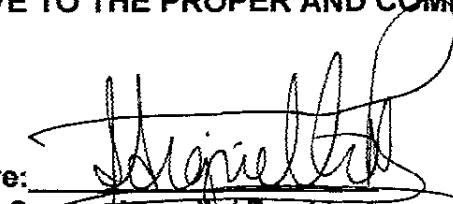


Title: PRESIDENT

FILED STATE  
SECRETARY OF CORPORATIONS  
03 FEB 24 PM 4:45

**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.**

Signature: \_\_\_\_\_



Sandra Arguello/ President  
PB&A Financial Services, Corp.

Date: 2/21/03