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(Re	questor's Name)			
(Ad	dress)	****		
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(City	y/State/Zip/Phone	<i>>#</i>)		
PICK-UP	WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer;				

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O3 MAR TO PM 1:50

TRANSMITTAL LETTER

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

SUBJECT: JU	ST MORTGAGES DIRECT	, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUSITINCE</u>	udesusia)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	i a check for:	
\$70.00	\$78.75	□ \$78.75	☑ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	LAWRENCE S. LIEBER	MAN		
11071.	Name	(Printed or typed)		
4074 CARDINAL GLEN PLACE				
Address				
	OVIEDO, FLORIDA 3276	5 5		
	City, State & Zip			
	407-977-6999			
Daytime Telephone number				

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 28, 2003

LAWRENCE S. LIEBERMAN 4074 CARDINAL GLEN PLACE OVIEDO, FL 32765

SUBJECT: JUST MORTGAGES, INC.

Ref. Number: W0300005880

We have received your document for JUST MORTGAGES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6962.

Valerie Ingram Document Specialist New Filing Section

Letter Number: 103A00012921

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ED

ARTICLE I NAME

The name of the corporation shall be:

JUST MORTGAGES DIRECT, INC.

03 MAR 10 PM 1:50

TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

520 N. ORLANDO AVENUE, SUITE 48 WINTER PARK, FLORIDA 32789

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A CORPORATION MAY BE ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 1000, WITH THE PAR VALUE OF \$.01

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

LAWRENCE LIEBERMAN, CEO/PRES. LAWRENCE LIEBERMAN, SECRETARY

ARTICLE VI REGISTERED AGENT

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

LAWRENCE LIEBERMAN 4074 CARDINAL GLEN PLACE OVIEDO, FLORIDA, 32765

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LAWRENCE LIEBERMAN 4074 CARDINAL GLEN PLACE OVIEDO, FL 32765

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

Signature/Incomprator

Date

Date