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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0121

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 224-7047

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FLORIDA PROFIT CORPORATION OR P.A.

SGN MORTGAGE COMPANY, INC.

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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H03000293612 3

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:

SGN MORTGAGE COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**2849 HOLLYWOOD BOULEVARD
HOLLYWOOD, FLORIDA**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BROKERAGE COMPANY

ARTICLE IV SHARES

The number of shares of stock is:

300

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

**DENNIS B. FREEMAN, Esq.
20801 BISCAYNE BLVD, Suite 304
ADVENTURA, FL 33180**

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

**DENNIS B. FREEMAN, Esq.
20801 BISCAYNE BLVD, Suite 304
ADVENTURA, FL 33180**

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

10/9/03

Date



Signature/Incorporator

10/9/03

Date

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H03000293612 3