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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)	)	
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:	}	
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## TRANSMITTAL LETTER

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

SUBJECT: HARBORTOWN MORTGAGE COMPANY, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original :	and one (1) copy of the articles of inco	orporation and a check for:
Filing Fee	9 \$78.75 Filing Fee & Certificate	X \$78.75 S87.50  Filing Fee Filing Fee, & Certified Copy & Certificate  ADDITIONAL COPY REQUIRED
	J. DAVID CAMPBELL	
	Nam	e (Printed or typed)
	2805 TAMIAMI TRAIL	
	Add	ress
	PUNTA GORDA, FL 33950	
•	City,	, State & Zip
	941-639-0680	
	Dayt	time Telephone Number

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

## AFFIDAVIT OF CORPORATE DISSOLUTION

STATE OF FLORICA )
)ss
COUNTY OF CHARLOTTE
I, Lewis L. Strickler, with business address of 2421 Shreve Street, Suite 111, Punta Gorda, Florida, 33950, being first duly sworn, state as follows:
I am the sole Principal in the corporation named Harbortown Mortgage Company, Inc. and am
willingly and immediately seeking to dissolve said corporation, permanently and completely.
I have no intention of further use of the corporate name Harbortown Mortgage Company, Inc. and I do not plan to seek future use of said corporate name at any time in the future.
I make this statement willingly and reserve no rights of rescindency upon the corporate name, Harbortown Mortgage Company, Inc.
Signed,  Jewis L. Strickler  President
Subscribed and sworn to before me this 8th day of OCT , 2003.
Seal:  Notary signature  JAMES E. STEUEINS
Notary name, printed
NOTARY PUBLIC My commission expires:

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### 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:

#### HARBORTOWN MORTGAGE COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2421 SHREVE STREET, SUITE 111 PUNTA GORDA, FLORIDA 33950

ARTICLE III SHARES

The number of shares of stock is:

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

J. DAVID CAMPBELL 2805 TAMIAMI TRAIL PUNTA GORDA, FL 33950

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

RODNEY M. MASSIE 2421 SHREVE STREET, SUITE 111 PUNTA GORDA, FLORIDA 33950

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/Incorporator

Data

Date