P03000130568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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03 NOV 13 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
03 NOV 13 AM 10:09
SECRETARY OF STATE
DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

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

SUBJECT: Community Mortgage Finance Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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:

Byron Washington
Name (Printed or typed)

P.O. Box 1587
Address

Orlando, florida 32801
City, State & Zip

800 645 0220
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

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SECRETARY OF S
DIVISION OF CORPO
03 NOV 13 AM 11

ARTICLE I NAME

The name of the corporation shall be: Community Mortgage Finance Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O. Box 1587
Orlando, Florida 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Byron Washington - President
Sandra Washington - Vice President
Brandy Cooke - Accountant / Secretary

P.O. Box 1587
Orlando, FL 32801

ARTICLE VI REGISTERED AGENT

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

Sandra Goodman-Washington
532 Canary Island Ct.
Orlando, FL 32828

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Byron Washington
P.O. Box 1587
Orlando, FL 32801

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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 Sandra Washington — Date 11/13/03

Signature/Incorporator — Date 11-13-03

Byron Washington