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#### TRANSMITTAL LETTER

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

Subject	<u>Hanselman Mortgage Brokera</u>	ige Inc.		
Enclosed is	s an original and two (2) copies o	f the articles of incorpo	ration and a check fo	r
S70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		(ADDITIONAL C	OPY REQUIRED)	
FROM:	Nellie Akalp Name	,		
	30141 Agoura Rd., Suite 205 Address			
	Agoura Hills, California 91301 City, State & Zip			y + meta
	818-879-9079 Daytime Telephone number			

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

# ARTICLES OF INCORPORATION

### Hanselman Mortgage Brokerage Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

ARTICLE I NAME	
The name of the Corporation shall be: Hanselman Mortgage Brokerage Inc.	
ADTICLE II DEDICIDAL OFFICE	
ARTICLE II PRINCIPAL OFFICE	' <del>'</del>
The principal place of business and mailing address of this corporation shall be:	
2680 NE 19th St.	nearn E
Pompano Beach, Florida 33062	ಸಿಕ್

#### ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1500 at \$0.01 par value per share.

#### ARTICLE IV INITIAL DIRECTORS

The name(s) and address(s) of the initial Director(s) is/are:

Stephen J. Hanselman 2680 Ne 19th St. Pompano Beach, Florida 33062

# ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Stephen J. Hanselman 2680 NE 19th St. Pompano Beach, Florida 33062

# <u>ARTICLE VI INCORPORATOR</u>

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

Nellie Akalp 30141 Agoura Rd., Suite 205 Agoura Hills, California 91301

Stellie als	12-16-03
Nellie Akalp, Incorporator	Date
Having been named as registered agent and to accept servi	ice of process for the above stated corporation at the
place designated in this certificate, I hereby accept the app	ointment as registered agent and agree to act in this
capacity. I further agree to comply with the provisions of a	
performance of my duties, and am familiar with and accep	pt the obligations of my position as registered agent.
Le Mra Homa Maa	17/18/2
	1 / 11 / 10 -

Date