

02/05/2004 10:30

Division of Corporations

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**Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : COMPLIANCE CONSULTING CORPORATION OF FLORIDA
Account Number : I20010000135
Phone : (561)586-3645
Fax Number : (561)586-6335

FLORIDA PROFIT CORPORATION OR P.A.

First Capital Mortgage Group, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

04 FEB -5 PM 6:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

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:

First Capital Mortgage Group, Inc.

ARTICLE II PRINCIPLE OFFICE

The principal place of business and mailing address of this corporation shall be:

1101 Duncan Circle, Unit 202
Palm Beach Gardens, FL 33418

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Whently Williams
1101 Duncan Circle, Unit 202
Palm Beach Gardens, FL 33418

ARTICLE V INITIAL DIRECTORS NAMES AND ADDRESSES

Whently Williams, Pres.
1101 Duncan Circle, Unit 202
Palm Beach Gardens, FL 33418

David Gefke, V/P
10 Newbury St.
Boston, MA 02116

ARTICLE IV INCORPORATOR

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

Whently Williams
1101 Duncan Circle, Unit 202
Palm Beach Gardens, FL 33418

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TALLAHASSEE, FLORIDA


Signature/Incorporator

2/4/04
Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/Registered Agent

2/4/04
Date