

PO4000029064

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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04 FEB 13 PM 1:50

SECONDARY STATE  
TALLAHASSEE, FLORIDA

T 7/2/13/04

## TRANSMITTAL LETTER

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

SUBJECT: A Plus Processing Incorporated  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Dominic M. Cason  
Name (Printed or typed)

3615 E. Paris St.  
Address

Tampa, Fl. 33610  
City, State & Zip

813-849-1131  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

February 2, 2004

DOMINIC M CASON  
3615 E PARIS ST  
TAMPA, FL 33610

SUBJECT: A PLUS PROCESSING INC.  
Ref. Number: W04000004506

RECEIVED  
04 FEB 13 PM 12:32  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for A PLUS PROCESSING INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Document Examiner  
New Filings Section

Letter Number: 304A00006901

**ARTICLES OF INCORPORATION**

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

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

A Plus Processing of Tampa Incorporated

04 FEB 13 PM 1:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2318 N. Highland Ave.  
Tampa, Fl. 33602

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To perform Mortgage Processing for several different Mortgage Companies

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Dominic M. Cason - President  
Melvin B. Cason - Vice President

**ARTICLE VI REGISTERED AGENT**

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

Dominic M. Cason  
3615 E. Paris St.  
Tampa, Fl. 33610

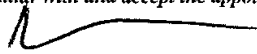
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Dominic M. Cason  
3615 E. Paris St.  
Tampa, Fl. 33610

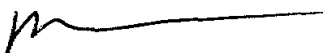
\*\*\*\*\*

*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

01-17-2004

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

01-17-2004

\_\_\_\_\_  
Date