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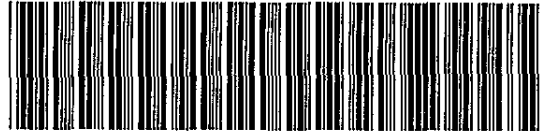
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
04 FEB 25 PM 2:27

Is

## TRANSMITTAL LETTER

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

SUBJECT:

*Townsland*

*TOWNHALL MORTGAGE, 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:

*MARK STEPHENS*

Name (Printed or typed)

*P.O. Box 457*

*19204 ST. ROAD 12*

Address

*BRISTOL FL 32321*

City, State & Zip

*(850) 228-7865 (850) 643-5115*

Daytime Telephone number

04 FEB 25 PM 2:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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)

## ARTICLE I NAME

The name of the corporation shall be:

Townsland MORTGAGE, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO. Box 457  
BRISTOL, FL. 32321

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MORTGAGE BROKERAGE BUSINESS

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MARK STEPHENS - Pres.  
19204 NW ST. RD. 12  
BRISTOL, FL 32321

## ARTICLE VI REGISTERED AGENT

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

19204 NW ST. RD. 12 MARK STEPHENS  
BRISTOL FL 32321

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARK STEPHENS  
13280 NW 16E CAJAL RD.  
BRISTOL, FL 32321

\*\*\*\*\*

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

Date

Signature/Incorporator

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA