P04000098223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

600038189496

06/28/04--01009--001 **70.00

~~06/28/04--01009--001 **70.00~~

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN 28 PM 1:11

TRANSMITTAL LETTER

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

SUBJECT: UNIVERSAL MORTGAGE PROTECTION, INC.
(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 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: ALFREDO J FLORES
Name (Printed or typed)

350 LAKEVIEW DRIVE SUITE# 204
Address

WESTON FLORIDA 33326
City, State & Zip

(954) 288-5735
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)

ARTICLE I NAME

The name of the corporation shall be:

UNIVERSAL MORTGAGE PROTECTION, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

350 LAKEVIEW DRIVE SUITE 204 WESTON, FL 33326

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE CONSULTANTS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN 28 PM 1:11

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALFREDO J FLORES PRESIDENT

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

ALFREDO J FLORES
350 LAKEVIEW DRIVE SUITE 204 WESTON, FL 33326

ARTICLE VII INCORPORATOR

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

ALFREDO J FLORES
350 LAKEVIEW DRIVE SUITE 204 WESTON, FL 33326

****

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: 6/24/04

Signature/Incorporator — Date: 6/24/04