

P04000098223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

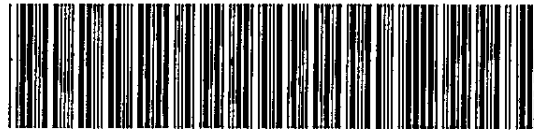
(Business Entity Name)

(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~~ *en*

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

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

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

Signature/Incorporator

Date

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