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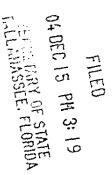
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TRANSMITTAL LETTER

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

SUBJECT:	CORNINS LOWE E	quity Fin		Corporation	041
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and \$78.75	a check for:	04	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	ED PH 3: 1	-
FROM:	Name	(Printed or typed) O (EAN) Address			
	308 498	State & Zip GFGO elephone number	19		

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)
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Corner Stone Equity Financial (OIP, PERSON STORE) ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
1301 S OCEAN UR SUIFE CJ 06
Holly wood, FC 33019 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To Give Residential É Commercial loans to public
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): MATI HEW W. OWEN 1301 5. O(+aw Pr Apt 7 506 Hollywood , FL 33019
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: MATHEW OWEN 2301 S 6 (CAN DR ATT 2 564
Hollywood Fl 37019 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MATTHEW W. OWEN 27-01 S. OCEAN DR ATTZ SOC
Holly wood fl 33019
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
Matthew W. Over 17] Oy Signature/Incorporator Date