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PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified CopiesCertificates of Status				
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TRANSMITTAL LETTER

Division of Corporati	ons			
P. O. Box 6327 Tallahassee, FL 3231	14			
	:			
SUBJECT: Financin	ģ Life, Inc. (PROPOSED CORPORA)	FE NAME - MUST INCL	IDE SHEEDY)	
	(FROFOSED CORFORA)	TE NAME – <u>MOST INCL</u>	<u>JUE SUFFIA</u>)	
Enclosed are an origi	hal and one (1) copy of the artic	eles of incorporation and	a check for:	
□ \$70.00	\$78.75	□ \$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
U	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of Status	
	1	ADDITIONAL CO		
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	<u> </u>			
FROM:	Financing Life, Inc.	(Printed or typed)		
	i i	(i fillied of typed)		
1	2472 West Atlantic Boulevard			
Address				
	:			
<u>C</u>	oral Springs, Florida 33071	State & Zip		
	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	oute at 21p		
(1 954) 753-6733			
<u>-</u>		elephone number		
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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:

Financing Life, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 12472 West Atlantic Boulevard

Coral Springs, Florida 33071

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Life Insurance Sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

James A. Tharp, Officer/Director Karen A. Tharp, Officer/Director 12472 West Atlantic Boulevard Coral Springs, Florida 33071

ARTICLE VI REGISTERED AGENT

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

Peter W. Dellapina, Esq. Mineo & Dellapina, P.A. 633 SE Third Avenue, Suite 4-F Fort Lauderdale, Florida 33301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James A. Tharp 12472 West Atlantic Boulevard Coral Springs, Florida 33071

Having been named as registered open to accept service of process for the above stated corporation at the place designated in this certificate, Lam familial with and accept the appointment as registered agent and agree to act in this capacity

am familial with ghd at oppositive appointment as registered agent and agree to act in this capacity

gnature/Registered Agent

Signature/Incorporator

12/29/04

SECHLIAR TOF STATE DIVISION OF CHEFORATION