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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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01/13/05--01040--008 **78.75

TRANSMITTAL LETTER

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

SUBJECT:	Dunstate Fun PROPOSED CORPORA	ding In	<i>د</i> ,	
	(PROPOSED CORPORA)	te name – <u>Must Incl</u>	IDESUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Alexander B. Coletti Name (Printed or typed) 582 John's Pass Ave				
Address Madaira B.L. Fl. 23708 City, State & Zip (727) 687-0117 Daytime Telephone number				



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 14, 2005

ALEXANDER B. COLETTI 582 JOHN'S PASS AVE MADEIRA BCH, FL 33708

SUBJECT: SUNSTATE FUNDING Ref. Number: W05000002396

We have received your document for SUNSTATE FUNDING and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Document Specialist New Filings Section

Letter Number: 405A00002945

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be: Sunstate Funding Inc.	FILED 2005 JAN 26 P 4: 18
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 14955 Gulf Blud. Guite 18	SECRETARY OF STATE TALLAHASSEE, FLORIDA
MADETRA Beach, F1. 33708 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Mortgage Broker Bosiness	
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): Alexander Benjamin Coletti (President) 14955 GJFBJJJ. Madeira Bah. Fl. 33708	
SARAH Beth Cohen (Treasurer/Secretary) 14955 Gulf Blud. Madeira Beh., Fl. 33708 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the regist Aleinnder B. Coletti 582 Johns Pass Ave., Medeira Beh. Fl 33708	ered agent is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Alexander B. Coletti 582 Johns Ross Ave. Madeira Ber. Fl. 3370) <i>5</i> 7
**************************************	**************************** oration at the place designated in this
Signature/Registered Agent	//11/05 Date
Signature/Incorporator	1/11/05 Date