

PD5000034278

(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

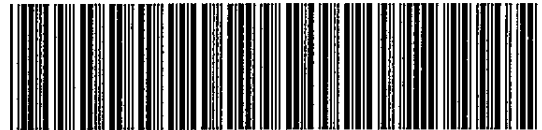
(Document Number)

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2545  
W05-9768



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02/16/05--01039--015 \*\*78.75

FILED  
2005 MAR -7 PM 3:04  
CLERK OF STATE  
TALLAHASSEE FLORIDA

gr 3/7/05

TRANSMITTAL LETTER

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

**FILED**  
2005 MAR -7 PM 3:04  
CLERK OF STATE  
TALLAHASSEE FLORIDA

**SUBJECT:** Southern Mortgage Group, 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

*Previously sent on 2/14/05*

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Jonathan D. Sawyer

Name (Printed or typed)

330 A1A North, Suite 324

Address

Ponte Vedra Beach, FL 32082

City, State & Zip

904-285-1445

Daytime Telephone number

**NOTE:** Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

FILED

2005 MAR -7 PM 3: 04

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

February 24, 2005

JONATHAN D. SAWYER  
330 A1A NORTH  
SUITE 324  
PONTE VEDRA BEACH, FL 32082

SUBJECT: A HOME LENDING CORPORATION  
Ref. Number: W05000009768

We have received your document for A HOME LENDING CORPORATION 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 245-6973.

Claretha Golden  
Document Specialist  
New Filings Section

850 - 245 - 6804  
W.H.J.

Letter Number: 505A00013116

# 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:

Southern Mortgage Group, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3901 Monument Road, Suite #2  
Jacksonville, FL 32225

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The above-styled corporation is hereby organized to conduct business as a residential lending company.

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ross Adolph, Director, 3901 Monument Road, Suite #2, Jacksonville, FL 32225

Chris Larabee, Director, 3901 Monument Road, Suite #2, Jacksonville, FL 32225

## ARTICLE VI REGISTERED AGENT

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

Albertelli & Associates, P.L.  
330 A1A North, Suite 324  
Ponte Vedra Beach, FL 32082

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

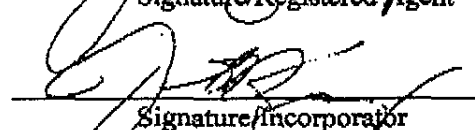
Albertelli & Associates, P.L.  
330 A1A North, Suite 324  
Ponte Vedra Beach, FL 32082

\*\*\*\*\*

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

3/7/05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

3/4/05  
\_\_\_\_\_  
Date

*Jonathan D. Sawyer*

**FILED**  
2005 MAR -7 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA