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### TRANSMITTAL LETTER

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

SUBJECT: J&MM	fortgage Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	□ \$78.75	\$78.75	<b>2</b> \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
1g 1 <b>00</b>	& Certificate of Status	& Certified Copy	Certified Cop & Certificate
		ADDITIONAL CO	Status PPY REQUIREI
EDOM: Mai	rieka N Richards		
FROM,	Name	(Printed or typed)	
		-	
•	5003 Marsha Dr		
-	— 10-11	Address	
<u> </u>	lacksonville, FL 32205		
	City	, State & Zip	
(	904)-891-5066		
<u> </u>		elephone mmber	

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)

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#### ARTICLE I NAME

The name of the corporation shall be:

J&M Mortgage Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 6003 Marsha Dr Jacksonville, FL 32205

#### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Mortgage Brokerage

#### ARTICLE IV SHARES

The number of shares of stock is:

1

#### INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

Marieka N Richards, Owner/President 6003 Marsha Dr Jacksonville, FL 32205

#### REGISTERED AGENT ARTICLE VI

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

Marieka N Richards 6003 Marsha Dr Jacksonville, FL 32205

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Marieka N Richards 6003 Marsha Dr Jacksonville, FL 32205

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