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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

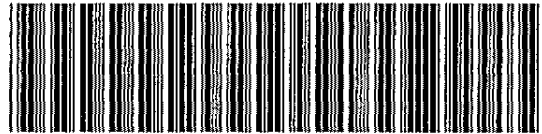
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CORRECT articles
DATE 3/31/05
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 MAR 28 PM 3:31

FILED

TRANSMITTAL LETTER

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

SUBJECT: Rapid Foreclosure Recovery, 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: John Santamaria
Name (Printed or typed)

6625 Miami Lakes Dr., Suite 322
Address

Miami Lakes, Florida 33014
City, State & Zip

(305) 777-3800 Ben 777-3818
Daytime Telephone number

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:

Rapid Foreclosure Recovery, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6625 Miami Lakes Dr., Suite 322
Miami Lakes, Florida 33014

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any legal purpose

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):

John Santamaria, President
6625 Miami Lakes Dr., Suite 322
Miami Lakes, Florida 33014

Dorothy Gates, V. President
6625 Miami lakes Dr., Suite 322
Miami Lakes, Florida 33014

ARTICLE VI REGISTERED AGENT

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

Ben R. Hetfeld, Esq.
Hetfeld & Associates
6625 Miami Lakes Dr., Suite 322
Miami Lakes, Florida 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John Santamaria, President
6625 Miami Lakes Dr., Suite 322
Miami Lakes, Florida 33014

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

3-21-05

Date



Signature/Incorporator

3-21-05

Date

FILED

2005 MAR 28 P 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA