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TRANSMITTAL LETTER

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

SUBJECT:	Inzardo Processing Ce			_		
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)			
Enclosed are an ori	iginal and one (1) copy of the artic	eles of incorporation and	a check for:			
Eliviolou ale an ori	Plint and one (1) oob) or all artic	nos of moorporation and				
\$70.00	□ \$78.75	□ \$78.75	X \$87.50			
Filing Fee	Filing Fee	Filing Fee	Filing Fee,			
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of			
		ADDITIONAL CO	Status PY REQUIRED			
FROM: Michele Maria Anzardo						
PROM: Michele Maria Anzardo Name (Printed or typed)						
6270 S.W. 129 Place #1103						
	•) 		
	Miami, FL 33183					
Miami, FL 33183 City, State & Zip						
	(305) 322-2408					
		elephone 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:

Anzardo Processing Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6270 S.W. 129 Place #1103 Miami, FL 33183

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To process mortgage loans.

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):

Michele Maria Anzardo - President 6270 S.W. 129 Place #1103 Miami, FL 33183

ARTICLE VI REGISTERED AGENT

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

Viviana Maria Labarta 14312 S.W. 181 Terrace Miami, FL 33177

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Michele Maria Anzardo 6270 S.W. 129 Place #1103 Miami, FL 33183

********	**********
Having been named as registered agent to accept service of process for the ab	ove stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent ar	nd agree to act in this capacity
WHI	1
_ V Clore	7126/05
Signature/Registered Agent	Date
V	

Michile M. amoudo

Signature/Incorporator

7/210/05

Date

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