P05000110a34

| (Re | equestor's Name) | | | |
|--------------------------|-------------------|-------------|--|--|
| | | | | |
| (Ad | dress) | | | |
| | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | TIAW [| MAIL | | |
| | | | | |
| (Bu | siness Entity Nar | me) | | |
| | | | | |
| (Do | ocument Number) | | | |
| a verta e | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| | | | | |
| Special Instructions to | Filing Officer: | | | |
| | | | | |
| | | | | |
| \ | | ļ | | |
| | | \ | | |
| ļ | | } | | |
| <u></u> | | | | |
| | | | | |

Office Use Only



400058127444

08/08/05--01027--017 **/8.75

FILED

05 AUG -8 PM 1: 02

SECRETARY OF STATE

8/9/05 BUK

TRANSMITTAL LETTER

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

| SUBJECT: Pinecre | est Solutions Inc. | | |
|----------------------|-----------------------------------|-----------------------------|---------------------------------------|
| - | (PROPOSED CORPOR | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| | | | |
| | | | |
| | • | | |
| Enclosed are an orig | ginal and one (1) copy of the art | ticles of incorporation and | l a check for: |
| | | _ | |
| \$70.00 | 5 \$78.75 | \$78.75 | \$87.50 |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, |
| | & Certificate of Status | & Certified Copy | Certified Copy |
| | | | & Certificate of |
| | | } | Status |
| | | ADDITIONAL CO | PY REQUIRED |
| | | | |
| | | | |
| | | | |
| EDANA Ste | even Schwartz | | |
| FROM. <u>Ga</u> | Nam | e (Printed or typed) | |
| | | • | |
| | 5840 Moss Ranch Rd | | |
| | 0040 MOSS RATIOTIVA | Address | · · · · · · · · · · · · · · · · · · · |
| | | | |
| | | | |
| | Pinecrest, FI 33156 | 0.7 | |
| | City | y, State & Zip | |
| | | | |
| | 305-812-1988 | | <u>-</u> |
| | 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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

05 AUG -8 PM 1:02 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pinecrest Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8505 SW 136 St Pinecrest, FI 33156

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Real Estate * MoctGAGES

ARTICLE IV

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS

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

Steven Schwartz-President-Secretary-Treasurer 5840 Moss Ranch Rd Pinecrest, FI 33156

REGISTERED AGENT

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

Steven Schwartz 5840 Moss Ranch Rd Pinecrest, FI 33156

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Steven Schwartz 5840 Moss Ranch Rd Pinecrest, FI 33156

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

Signature/Incorporator