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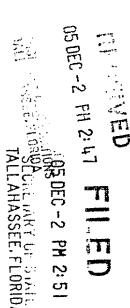
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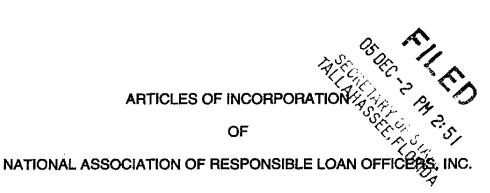
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: National Association of Responsible Loan Officers, Inc. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) cop	of the articles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of S	Status \$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate Status ADDITIONAL COPY REQUIRED
FROM: Martin Friedman, R	se, Sundstrom & Bentley, LLP Name (Printed or typed)
2180 W. State R	pad 434, Suite 2118. Address
Longwood, FL 32	City, State & Zip
407-830-6331	Daytime Telephone number

of

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



The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be National Association of Responsible Loan Officers, Inc.

ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of this corporation shall be 335 Beard Street, Tallahassee, FL 32303.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time shall be limited to 1,000 shares of voting common stock.

ARTICLE IV NAME AND ADDRESS OF REGISTERED AGENT

The name and address of the registered agent is Robert Skrob, 335 Beard Street, Tallahassee, FL 32303.

ARTICLE V INITIAL BOARD OF DIRECTORS

The Board of Directors of this corporation shall be comprised of one person. The name and address of the persons who shall serve as the initial Board of Directors are as follows:

Robert Skrob 335 Beard Street Taliahassee, FL 32303

ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Article of Incorporation is:

Robert Skrob 335 Beard Street Tallahassee, FL 32303

<u>30</u>	The undersigned incorporator has executed these Articles of Incorporation this day of November , 2005.
	1 Call Sh
	ROBERT SKROB

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is National Association of Responsible Loan Officers, Inc.

The name and address of the registered agent and office is:

Robert Skrob 335 Beard Street Tallahassee, FL 32303

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

ROBERT SKROB

DATE: 1//32/2005