

P06000025870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

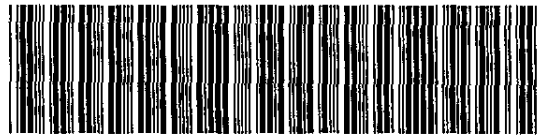
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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01/26/06--01003--028 \*\*43.75

02/22/06--01001--003 \*\*70.00

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DIVISION OF CORPORATE &  
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EFFECTIVE DATE

2-21-06



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 2, 2006

JUSTA VICTORIN  
18403 NW 9TH STREET  
PEMBROKE PINES, FL 33029

SUBJECT: AMERISTA, LLC  
Ref. Number: L04000020694

2006 FEB 21 PM 2:34  
F.H. LU  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

We have received your document for AMERISTA, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Document Specialist

Letter Number: 406A00007743

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AMERISTA MORTGAGE, INC.

(Name of Resulting Florida Profit Corporation)

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

JUSTA VICTORIN

(Contact Person)

AMERISTA MORTGAGE, INC.

(Firm/Company)

18403 NW 9TH STREET

(Address)

PEMBROKE PINES, FL 33029

(City, State and Zip Code)

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For further information concerning this matter, please call:

JUSTA VICTORIN

(Name of Contact Person)

at ( 954 ) 579-2641

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$105.00 Filing Fees

☒ \$113.75 Filing Fees  
and Certificate of  
Status

☐ \$113.75 Filing Fees  
and Certified Copy

☐ \$122.50 Filing Fees,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

**AMERISTA, LLC**

(Enter Name of Other Business Entity)

604000030694

2. The "Other Business Entity" is a **LIMITED LIABILITY COMPANY**  
(Enter entity type. Example: limited liability company, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of **FLORIDA**  
(Enter state, or if a non-U.S. entity, the name of the country)

on **MARCH 16, 2004**  
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

**FLORIDA, USA**

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

**AMERISTA MORTGAGE, INC.**

(Enter Name of Florida Profit Corporation)

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EFFECTIVE DATE  
**8-21-06**

5. If not effective on the date of filing, enter the effective date: Feb 21, 2006.  
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 20<sup>th</sup> day of February, 20 06.

Signature: [Signature]

(Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.)

Printed Name: JUSTA VICTORIA Title: President/owner

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Fees:

|                                             |                   |
|---------------------------------------------|-------------------|
| Certificate of Conversion:                  | \$35.00           |
| Fees for Florida Articles of Incorporation: | \$70.00           |
| Certified Copy:                             | \$8.75 (Optional) |
| Certificate of Status:                      | \$8.75 (Optional) |

## 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:

AMERISTA MORTGAGE, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PLACE OF BUSINESS:  
20170 PINES BLVD, SUITE 302  
PEMBROKE PINES, FL 33029

ALL MAILING:  
18403 NW 9TH STREET  
PEMBROKE PINES, FL 33029

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A MORTGAGE BROKERAGE COMPANY TO PROVIDE MORTGAGE, FINANCING, LOANS, REFINANCING, PROCESSING AND ALL OTHER ACTIVITIES RELATED TO FINANCING RESIDENTIAL, INDIVIDUAL, COMMERCIAL AND BUSINESSES ENTITIES.

### 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):

JUSTA VICTORIN - *President*  
18403 NW 9TH STREET  
PEMBROKE PINES, FL 33029

### ARTICLE VI REGISTERED AGENT

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

JUSTA VICTORIN  
18403 NW 9TH STREET  
PEMBROKE PINES, FL 33029

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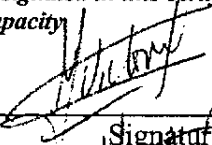
**ARTICLE VII INCORPORATOR**

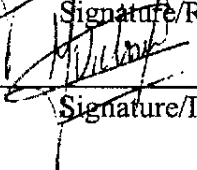
The name and address of the Incorporator is:

JUSTA VICTORIN  
18403 NW 9TH STREET  
PEMBROKE PINES, FL 33029

\*\*\*\*\*

*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

02/15/2006

Date

02/15/2006

Date

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