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SECULIATION STATE

2,6 20061

COVER LETTER

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

SUBJECT: MCCO MORTGAGE CORP.

(352)873-2335

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$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 COPY REQUIRED Mildred Lamela Ramirez FROM: Name (Printed or typed) 8010 SE 1ST AVENUE Address Ocala, FL 34480

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

City, State & Zip

Daytime Telephone number

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:

MCCO MORTGAGE CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8010 SE 1ST AVENUE OCALA, FL 34480

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MORTGAGE BROKERAGE BUSSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

N/A

ARTICLE VI REGISTERED AGENT

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

CRISTINA DALLMANN 5823 RIVA RIDGE DRIVE WESLEY CHAPEL, FL 33544

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MILDRED LAMELA RAMIREZ 8010 SE 1ST AVENUE OCALA, FL 34480

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

Date
9/20/0/0

/ 20/0(p

SECREDARY SIMI