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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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CB 12-13-06

COVER LETTER

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

SUBJECT:	-1	the	Low	Rate	Dep	oot,	Inc.	
•			(PROPOS	ED CORPORA	TE NAM	IE – <u>MUST</u>	INCLUDE SUFFIX)	

Enclosed are an original and one (1) copy of the arti-	cles of incorporation and	a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM: _	Felix E. Santiago
	Name (Printed or typed)
	8591 Whispering Oaks Way
	_
	West Palm Beach, FC 33411
	561-793-8448
	Daytime Telephone number

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

ÄRTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be: The Low Rate Depot, I	nc.
ARTICLE II PRINCIPAL OFFICE	A
The principal place of business/mailing address is: 8591 whispering Cake West Palm Beach, Fo	-s way - 33411
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Mortgage Busines	≤S
ARTICLE IV SHARES	OB OC
The number of shares of stock is: 100 (One-hundred)	FILED. T 13 PM 3: 32 ATTIGE OF STREET
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	TO PRO
List name(s), address(es) and specific title(s):	OHIO 3
Felix E. Santiago President	A 12
Felix E. Santiago, President 8591 whispering Cake way	
West Palm Beach, FL 33411	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:	
Felix Santiago	
8591 whispering Oaks way	
West Palm Beach, FL 33411 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Felix E. Santiago 8591 whispering Oaks Way West Palm Beach, FL 33411	
8591 whispering Oaks Way	
west lain Beach, FL 33411 **********************************	*****
Having been named as registered agent to accept service of process for the above stated corporation at the place certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	ce designated in this
Decif & fully 16-11	-0b
Signature/Registered Agent Date	
Signature/Incorporator Date	-UP
Duite	