

P07000083926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

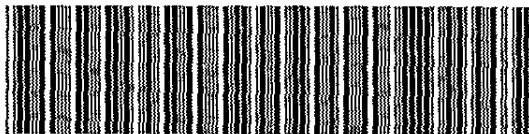
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/25/07--01021--003 **70.00

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07 JUL 25 PM 2:00

KS
7/25/07

COVER LETTER

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

FILED
07 JUL 25 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FL 32314

SUBJECT: Short Sale Exchange Co.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: William Negrón
Name (Printed or typed)

15476 NW 77 CT #400
Address

Miami Lakes, FL 33016
City, State & Zip

786-838-5000
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)

ARTICLE I NAME

The name of the corporation shall be:

Short Sale Exchange Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

15476 NW 77 CT.
Suite 400
Miami Lakes, FL. 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all legal purposes

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):

Elsy Negron, President
15476 NW 77 CT. #400
Miami Lakes, FL. 33016

ARTICLE VI REGISTERED AGENT

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

William Negron
15476 NW 77 CT. # 400
Miami Lakes, FL. 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Elsy Negron
15476 NW 77 CT. # 400
Miami Lakes, FL. 33016

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

FILED

07 JUL 25 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Date



Date