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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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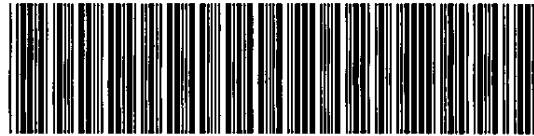
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2007 AUG -9 PM 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch AUG 10 2007

COVER LETTER

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

SUBJECT: Premier Mortgage Funding USA, Inc.
(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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Nicole Cugno
Name (Printed or typed)

2333 Feather Sound Drive, B708
Address

Clearwater, FL 33762
City, State & Zip

888-946-3202
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:

Premier Mortgage Funding USA, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2333 Feather Sound Drive, B708 Clearwater, FL 33762

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mortgages

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):

Nicole Cugno, President
2333 Feather Sound Drive, B708
Clearwater, FL 33762

ARTICLE VI REGISTERED AGENT

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

Nicole Cugno, President
2333 Feather Sound Drive, B708
Clearwater, FL 33762

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nicole Cugno, President
2333 Feather Sound Drive, B708
Clearwater, FL 33762


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

08/01/07

Date



Signature/Incorporator

08/01/07

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA