## P08.000052331

(Requestor's Name)				
(Address)				
•				
(Address)				
( (dai-555)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Boodinent Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
,				

Office Use Only



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05/27/08--01033--022 \*\*78.75

SECRETARY OF STAIL

OIVISION OF CORPORATIONS

EPS/28/08

## **COVER LETTER**

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

SUBJECT:	Loan Mocks	fication C ATE NAME-MUST INCI	enter Inc
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:		Morale (Printed or typed)	
-	1315 S.E	35th Street	<del></del>
	Cape Cor	ral Florida y, State & Zip	<u> 3390Y</u>
	2-39 - 2 Daytime	65-5989 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)
ADDICIT TO I BLANCE
The name of the corporation shall be: Loan Modification Center, Inc.
The name of the corporation shall be.
TO THE STATE OF TH
ARTICLE II PRINCIPAL OFFICE
The principal street address and mailing address, if different is:
ARTICLE II PRINCIPAL OFFICE  The principal street address and mailing address, if different is:  1315 S.E. 354 Street  Cape Caral, FL.33904  ARTICLE III PURPOSE
Cape Coral, FC. 33904 5 5
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Loss mitigation company.
Loss mitigation company.
ARTICLE IV SHARES The number of shares of stock is: (1,000) One thousand
The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s) address(os) and specific title(s):
Dennis A. Morales - President
Dennis 17.
Orlando R. Morales - Vice President Secretary
Secretary
·
ARTICLE VI REGISTERED AGENT  The name and Elevidar street address (P.O. Day NOT accounts big) of the registered agent in
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:  Dennis Antonio Moraves
Dennis Antonio Moraves
1315 S.E. 35 th Street
Cape Coral, Fr 33904
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
1315 S.E. 354 Street
Cape Coral, Fc. 33904
<b>\</b>
***********************
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
(m) 2000 Mude 5/23/08
Signature/Registered Agent \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(I) ) 1 - th Mule - think 5/23/08
Signature/Incorporator Date