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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : 120000000257
Phone : (850) 224-8870
Fax Number : (850) 222-1222

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 APR -9 AM 11:58

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FLORIDA PROFIT/NON PROFIT CORPORATION

Your Loan Modification Solution, Inc.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
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MRD 3/10

MAR. 9. 2009 3:29PM

CAPITAL CONNECTION

NO. 2140 P. 2



March 9, 2009

FLORIDA DEPARTMENT OF STATE

Division of Corporations

YOUR CAPITAL CONNECTION, INC.

SUBJECT: YOUR LOAN MODIFICATION SOLUTION, INC..

REF: W09000010991

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please verify the address listed for the officers and directors listed in Article V.

If you have any further questions concerning your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

FAX Aud. #: H09000051727
Letter Number: 409A00007976

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Your Loan Modification Solution, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1776 North Pine Island Road, Suite 208
Plantation, Florida 33322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares - no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jeffrey Rosner - Director
Richard Klassman - Director
Corinne Rosner - Secretary
Beverley Klassman - Secretary

Address for all is - *rd*

1776 North Pine Island Suite 208
Plantation, Florida 33322

ARTICLE VI REGISTERED AGENT

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

Corinne B. Rosner, P.A.
1776 North Pine Island Road, Suite 208
Plantation, Florida 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Corinne B. Rosner, P.A.
1776 North Pine Island Road, Suite 208
Plantation, Florida 33322

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

3/4/09

Date



Signature/Incorporator

3/4/09

Date