P09000039320

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

Office Use Only



700152687777

05/01/09--01051--011 **78.75

SECRETARY OF STATE NLLAHASSEE, FLORIDA

TILED

MAY -5 2009 D. A. WHITE OMNI BUSINESS SERVICES, INC DBA OMNI INSURANCE SERVICES 2413 BISCAYNE BLVD MIAMI, FLORIDA 33137 TEL; 305-576-7755 FAX:305-576-9107

April 29, 2009

Florida Dept of State Division of Corporations P O BOX 6327 Tallahassee, Florida

Dear Sir or Madam:

Enclosed you will find the Articles of Incorporation of SUNCOAST MORTGAGE EXPERT, INC along with a Money Order in the amount of \$ 78.75. Please register it for me

Thank You

Emmanuel Regis

ARTICLES OF INCORPORATION OF SUNCOAST MORTGAGE EXPERT, INC

The undersigned incorporator hereby make, subscribe, acknowledge and file with the Department of State these Articles for the purpose of forming a Corporation for Profit in accordance with the Laws of the State of Florida.

ARTICLE I-NAME:

The name of this Corporation shall be:

SUNCOAST MORTGAGE EXPERT, INC

ARTICLE II-GENERAL NATURE OF BUSINESS:

This Corporation may engage in activity or business peermitted under the laws of the United States of America, and the State of Florida.

ARTICLE III-CAPITAL STOCK:

The maximum number of shares which the Corporation shall have authority to issue is the total sum of:

SHARES PAR VALUE

100,000 \$ 1.00

Which shall be designated "Common Shares", each of said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of the stockholders. All or any part of said apital Stock my be paid for in cash, in property (other than stock or securities) or in labor or services at a fair valuation to be fixed by the incorporator or by the Board of Directors at a meeting called for such purpose. All stock when issued shall be fully paid for and shall be non-assessable.

ARTICLE IV-TERM OF CORPORATE EXISTENCE:

The Corporation shall have perpetual existence.



ARTICLE V-INITIAL REGISTERED OFFICE AND INITIAL AGENT

ADDRESS OF OFFICE

AGENT AT SUCH ADDRESS

18121 N.W. 6th AVENUE MIAMI, FLORIDA 33169

LOUBERT PIERRE

***IT IS ALSO THE MAILING ADDRESS FOR THIS CORPORATION

ARTICLE VI-DIRECTOR (s)

The Corporation shall have a minimum of one (1) director. The number of Directors may be increased from time to time by Amendment of By-Laws.

ARTICLE VII-INITIAL BOARD OF DIRECTORS IS/ARE:

DIRECTOR (s)

ADDRESS

LOUBERT PIERRE

18121 N.W. 6th AVENUE

LOUBERT PIERRE

The member (s) of the first board of Director, unless otherwise provided by the By-laws shall hold office for the first year of the Existence or until their successors are selected or appointed and qualified.

ARTICLE VIII: SUBSCRIBER (S)

NAME

ADDRESS

NUMBER OF SHARES

LOUBERT PIERRE

18121 N.W. 6th PLACE

MIAMI, FL 33169

80,000

ARTICLE IX-OFFICERS:

The officer of this Corporation shall be a President who shall be a Director, a Secretary and a Treasurer and such officer, agent and factor as may deemed necessary.

OFFICERS

TITLE

ADDRESS

LOUBERT PIERRE

PRESIDENT

18121 NW 6th PLACE MIAMI, FI 33169

ARTICLE X-AMENDMENT:

The corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by the laws of the State of Florida and all rights conferred upon stockholder herein after are subject to this reservation.

IN WITNESS W	HEREOF, the undersi	gned incorporator (s) have executed these Articles o	f Incorporation
this <u>28</u>	Day of_	APRIL	2009	
Signature (s)	of Incorporator(s):			

Loubert Pierre / President

Loubert Pierre / Treasurer

Loubert Plerré / Secretary

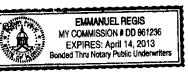
State of Florida

County of Miami-Dade

The foregoing instrument was acknowledged before me this_

Notary Signaturé

My Commission Exp



CERTIFICATE DESIGNATED REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the prevention of section 607.325, florida statutes, the undersigned Corporation organized under the Laws of the State of Florida, submits the following statement designating the registered agent in the State of Florida.

1-The name of the Corporation is:

SUNCOAST MORTGAGE EXPERT, INC

2-The name and address of the registered agent and office is:

18121 N.W. 6th Place Miami, Florida 33169

IT IS ALSO THE MAILING ADDRESS OF THIS CORPORATION

ate: 04/28/300

Signature / Corporate Officer

Having been named to accept service of process for the above stated. Corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agre to comply with the provision of all statutes relative to the proper and complete performance of my duties and I accept the duties, and obligation of section 607.325 Florida Statutes.

Signature: 3

Datre: /

I hereby certify that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowlegments personally appeared:

Name: LOUBERT Sierreknown to be the person described and registered agent

State of Florida

County of Miami-Dade

The foregoing instrument was acknowledged and sworn to before me this_of_APRIC_2009

EMMANUEL REGIS
MY COMMISSION # DD 861236
EXPIRES: April 14, 2013

Notary Signatur

Commission Expire