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SECRETARY OF STATE LLAHASSEE, FLORIDA

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D.A. WHITE

COVER LETTER

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

SUBJECT: Home L	oan Support Services Managem	ent Inc.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
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	☑ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
			ADDITIONAL COPY REQUIRED	
		e (Printed or typed)		
<u>245</u>	Arch Creek Rd.	Address		
<u>Nor</u>	th Miami, Florida 33181 City,	State & Zip		
561	-366-7018			
	Daytime 7	Celephone number	· · · · · · · · · · · · · · · · · · ·	
Vick	i@kypsupportservices.org	\		
	E-mail address: (to be use	ed for future annual report i	notification)	

NOTE: Please provide the original and one copy of the articles.

Articles of Incorporation of Home Loan Support Services Management Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Article I: Name

The name of the incorporation shall be: Home Loan Support Services Management Inc.

Article II: Address

Address of the Incorporation shall be: 777 South Flagler Drive suite 800 West Palm Beach Florida 33401.

Article III: Purpose

The purpose of the incorporation shall be to management services for loan modification, debt settlement and credit repair.

Article IV: Shares

The authorized amount shall be 500 shares @ .0001

Article V: Initial Officers and Directors

Mitra Concepcion: President

Francisco Concepcion: Vice President Mitra L. Lopez: Secretary/ Treasurer

Article VI: Registered Agent

Mitra Concepcion 245 Arch Creek Rd. North Miami, Florida 33181

Article VII: Incorporator

Mitra Concepcion 245 Arch Creek Rd. North Miami, Florida 33181

Mitra Concepcion