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# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CSH SERVICES, LLC

Account Number : 120070030160

: (800)494-3124

Phone Fax Number

: (561) 455-9885

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				

# FLORIDA PROFIT/NON PROFIT CORPORATION

Lawrence Shapiro Lending, Inc.

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SECRETARY OF STATE DIVISION OF CORPORATION

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## **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:

LAWRENCE SHAPIRO LENDING, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

819 COUNTY ROAD 1 PALM HARBOR, FLORIDA 34683

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

### ARTICLE V. INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR

MARC G ALLEN

819 COUNTY ROAD 1

PALM HARBOR, FLORIDA 34683

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PAGE 2 LAWRENCE SHAPIRO LENDING, INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

GARY GLASS 819 COUNTY ROAD 1 PALM HARBOR, FLORIDA 34683

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

MARC G ALLEN 819 COUNTY ROAD 1 PALM HARBOR, FLORIDA 34683

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.

GARY GLASS / Registered Agent

MARC G ALLEN /Incorporator

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