# P10000 58713

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	<u>i</u> e #)		
PICK-UP	☐ WAIT	MAIL .		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	· Certificates	s of Status		
Special Instructions to Filing Officer:				
		·		
, .				

Office Use Only



500183345945

07/16/10--01015--010 \*\*70.00

SECRETARY OF STATE



Ps 7/20/10

# **COVER LETTER**

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

SUBJECT: FOREC	LOSURE MEDIATION GROUP,	INC	
<del></del>	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l 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 CO	DPY REQUIRED
FROM: JA	MIE L ALLEN, ESQUIRE	(D: (1 - 4 - 1)	
	Nam	e (Printed or typed)	
110	E BROWARD BLVD, SUITE 17	<b>'</b> 00	
		Address	

FORT LAUDERDALE, FL 33301

JAMIE@JAMIEALLENLAW.COM

954-793-4170

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

City, State & Zip

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

# 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:

FORECLOSURE MEDIATION GROUP, INC

# ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 110 E BROWARD BLVD, SUITE 1700 FORT LAUDERDALE, FL 33301

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
MEDIATION SERVICES AND ANY OTHER LAWFUL BUSINESS

#### ARTICLE IV SHARES

The number of shares of stock is: 100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): JAMIE L. ALLEN, EQUIRE

PRESIDENT 110 E BROWARD BLVD, SUITE 1700 FORT LAUDERDALE, FL 33301

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: JAMIE L ALLEN, ESQUIRE
110 E BROWARD BLVD, SUITE 1700

FORT LAUDERDALE, FL 33301

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: JAMIE L ALLEN, ESQUIRE 110 E BROWARD BLVD, SUITE 1700

FORT LAUDERDALE, FL 33301

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

Signature/Indorporator

7-11-10 Date

7-11-10

Date

10 JUL 16 PM 2:

+