

P1000087022

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000231855 3))



H100002318553ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

10 OCT 22 PM 5:04

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

From: Account Name : CASEY CIKLIN LUBITZ MARTEMS & O'CONNELL
 Account Number : 076376001447
 Phone : (561) 832-5900
 Fax Number : (561) 833-4209

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
 Highlands Mortgage Acquisition Corp.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 2010 OCT 22 PM 2:10

gr 10/25/10

From:

To: T415*18506176381

10/22/2010 16:11

#307 P.002/002

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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

2010 OCT 22 PM 2:10

ARTICLE I NAME

The name of the corporation shall be: Highlands Mortgage Acquisition Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address
c/o David Stewart
2820 N.W. 45th Street
Boca Raton, Florida 33434

Mailing address, if different is:
same as principal office

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation is organized for the purpose of transacting any and all lawful business which corporations may transact pursuant to Chapter 607, Florida Statutes.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares of Common Stock, \$1.00 par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: David Stewart, President Name and Title: _____
Address: 2820 N.W. 45th Street Address: _____
Boca Raton, Florida 33434

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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


Name: Gary Walk, Esq.
Address: 515 N. Flagler Drive, 20th Floor
West Palm Beach, Florida 33401

ARTICLE VII INCORPORATOR

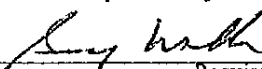
The name and address of the incorporator is:

Name: Gary Walk, Esq.
Address: 515 N. Flagler Drive, 20th Floor
West Palm Beach, Florida 33401

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

 : 10/22/2010
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 : 10/22/2010
Required Signature/Incorporator Date

H10000231855 3