

MD 11/25

## COVER LETTER

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

SUBJECT: ALL Florida Mortgage, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles 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**

FROM: GREG MAYER  
Name (Printed or typed)

14561 MAJESTIC EAGLE CT  
Address

FORT MYERS FL 33912  
City, State & Zip

239-691-5882  
Daytime Telephone number

GREGOMAYER@MSN.COM  
E-mail address: (to be used for future annual report notification)

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

**ALL FLORIDA MORTGAGE, INC.**

**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: All Florida Mortgage, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

14561 Majestic Eagle Ct

Fort Myers, FL 33931

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To transact any lawful business for which corporations may be incorporated under the Florida General

Corporation Act, engage in any other trade or business which can, in the opinion of the Board of

Directors of the Corporation, be advantageously carried on in connection with or auxiliary to the

foregoing business.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000 shares of common stock of the same class and at a par value of \$.10

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Gregory A. Mayer, President

Name and Title: \_\_\_\_\_

Address 14561 Majestic Eagle Ct.

Address: \_\_\_\_\_

Fort Myers, FL 33931

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: Gregory A. Mayer  
Address: 14561 Majestic Eagle Ct.  
Fort Myers, FL 33931

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Gregory A. Mayer  
Address: 14561 Majestic Eagle Ct.  
Fort Myers, FL 33931

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: November 20, 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

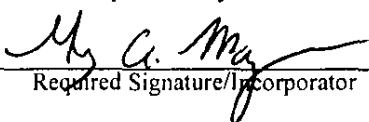
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
Required Signature/Registered Agent

11/12/15  
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.*

  
Required Signature/Incorporator

11/12/15  
Date