

CORPORATION INFORMATION
SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32310
904-222-9171
904-222-0193 FAX

CSC networks

MAIL TO:
P.O. Box 5820
TALLAHASSEE, FL 32314

ACCOUNT NO. : 072100000032

REFERENCE : 524122 8343A

AUTHORIZATION :

COST LIMIT : 9 70.00

DIVISION OF CORPORATION

800-342-8086

95 JAN 12 AM 11:47

800001378258

ORDER DATE : January 11, 1995

ORDER TIME : 5:19 PM

ORDER NO. : 524122

CUSTOMER NO: 8343A

CUSTOMER: Benjamin Schiff, Esq
BENJAMIN SCHIFF, ESQ

490 S.w. 101st Terrace
Plantation, FL 33324

DOMESTIC FILING

P95000003421

NAME: SUNPOINTE MORTGAGE CORP.

XXXX ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XXXX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper

EXAMINER'S INITIALS:

FILED
95 JAN 12 4 8 01
SECRET
TALLAHASSEE, FLORIDA

1-13-95
C1

ARTICLES OF INCORPORATION
OF
SUNPOINTE MORTGAGE CORP.

FILED
95 JAN 12 PM 8 04
SECRET
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

SUNPOINTE MORTGAGE CORP.

The address of the principal office of this corporation shall be 9731 Northwest 41st Street, Miami, Florida 33178, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 6,000 shares of common stock having \$.10 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Information Services, Inc.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. SPECIAL PROVISION

It is the intent of the Incorporator that the corporation will qualify under section 1244 of the Internal Revenue Code.

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Information Services, Inc.
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Information Services, Inc., has hereunto set their hand and seal of Corporation Information Services, Inc., on January 11, 1995.

CORPORATION INFORMATION SERVICES, INC.

By:

Laura R. Dunlap
Its Agent, Laura R. Dunlap

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

FILED
95 JAN 12 AM 8 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporation Information Services, Inc., a Florida corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION INFORMATION SERVICES, INC.

By: Laura R. Dunlap
Its Agent, Laura R. Dunlap

LRD/dks

P95000003421

BENJAMIN SCHIFF
Attorney At Law
490 SOUTHWEST 101st TERRACE
PLANTATION, FLORIDA 33324

2/3
T000001397877
-02/06/95--01003--003
*****35.00 *****35.00

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1.	(Corporation Name)	(Document #)
2.	(Corporation Name)	(Document #)
3.	(Corporation Name)	(Document #)
4.	(Corporation Name)	(Document #)

☐ Walk in ☐ Pick up time _____

☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
95 FEB -3 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/16/95
Mr. Schiff called.
She wanted name (corp)
was on the RA chg.
-27m. I corrected the name
and sent her
new copy & letter.

Examiner's Initials

Date Filed _____

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: Sunpointe Mortgage Corporation

2. The name and address of its present registered agent is:

Corporation Information Services, Inc.
1201 Hays Street
Tallahassee, FL 32301

3. The name and street address to which its registered agent is to be changed is:
(P.O. BOX NOT ACCEPTABLE)

~~TEEN~~ BENJAMIN SCHIFF

490 SW 101 TERRACE

PLANTATION, FL 33324

FILED
95 FEB -3 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

BENJAMIN SCHIFF - VICE PRESIDENT
(Typed or printed name and title)

Signature _____

(President or Vice President)

Date 1/19/95

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY, I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name BENJAMIN SCHIFF

Signature _____

(Agent)

Date 1/19/95

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **95000003421**

1 Corporation Name

Sunpointe Mortgage Corporation

Principal Place of Business

6918 Stirling Road
Hollywood, FL 33024

Mailing Address

6918 Stirling Road
Hollywood, FL 33024

If above addresses are incorrect in any way, file through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

6918 Stirling Road

3. New Mailing Address, if Applicable

(SAME)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hollywood, FL 33024

City & State

Zip

Zip

33024

Country

USA

Country

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)

2

Name of Officers
and/or Directors

3

Street Address of Each
Officer and/or Director
(Do NOT Use Post Office Box Numbers)

4

City / State / Zip

Pres.

Doron A. Rachman

6918 Stirling Road

Hollywood, FL 33024

G.M.

Lawrence M. Fontana

6918 Stirling Road

Hollywood, FL 33024

100002022501-6
-12/06/96--01087--002
****383.75 ****383.75

8. Name and Address of Current Registered Agent

Corporation Information Services
1201 Hays Street
Tallahassee, FL 32301

9. Name and Address of New Registered Agent

Name

Doron A. Rachman

Street Address (P.O. Box Number is Not Acceptable)

6918 Stirling Road

Suite, Apt. #, Etc.

City

Hollywood

State

FL

Zip Code

33024

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Date 11/19/96

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S.; further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/19/96

Date

Daytime Phone #

(954) 985-8595

FILED

96 DEC -2 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

96-00

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified
To Do Business in Florida

01/12/95

Applied For

5. FEI Number

65-0544913

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status