# 0052875 RE: CTAR FINANCIS PINCES CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallabassee, FL 32301, (904)224 8870 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1 800-342-8062 FAX (904) 222-1222

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#### FLORIDA DEPARTMENT OF STATE

July 10, 1995

Sandra B. Mortham Secretary of State

CAPITAL CONNECTION P.O. BOX 10349 TALLAHASSEE, FL 32302

SUBJECT: STAR FINANCIAL SERVICES, INC.

Ref. Number: W95000013776

We have received your document for STAR FINANCIAL SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6928.

Agnes Bundick Corporate Specialist

Letter Number: 995A00033044

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 JUL 10 PH 3:05

## ARTICLES OF INCORPORATION OF STAR FINANCIAL SERVICES, INC.

I, THE UNDERSIGNED HEREBY APPLY FOR THE PURPOSE OF BECOMING A CORPORATION, BY AND UNDER THE PROVISIONS OF THE STATUTES OF THE STATE OF FLORIDA, PROVIDING FOR THE FORMATION, LIABILITIES, RIGHTS, PRIVILEGES AND IMMUNITIES OF A CORPORATION FOR PROFIT.

#### ARTICLE I

NAME: THE NAME OF THE CORPORATION SHALL BE: STAR FINANCIAL SERVICES, INC.

LOCATION: THE CORPORATION'S PRINCIPAL OFFICE AND REGISTERED OFFICE ARE LOCATED AT 7520 NW FIFTH STREET, SUITE 100, PLANTATION, FLORIDA 33317.

#### ARTICLE 11

GENERAL NATURE OF BUSINESS: THE GENERAL NATURE OF THE BUSINESS AND OBJECTS AND PURPOSES TO BE TRANSACTED AND CARRIED ON ARE TO DO ANY AND ALL THINGS HEREIN MENTIONED, AS FULLY AND TO THE SAME EXTENT AS A NATURAL PERSON MIGHT OR COULD DO, VIZ:

A. TO PERFORM ANY AND ALL FUNCTIONS OR SERVICES ALLOWABLE TO A MORTGAGE BROKERAGE BUSINESS, CORRESPONDENT LENDER, OR LENDER AS PERMITTED BY THE LAWS AND REGULATIONS OF THE STATE OF FLORIDA DEPENDING ON THE LICENSE OBTAINED BY STAR FINANCIAL SERVICES INC.

THIS INCLUDES THE ORIGINATION, BROKERAGE AND SALES OF ALL TYPES OF LOANS AND MORTGAGES UNDER SUCH TEPMS AND CONDITIONS AS PERMITTED BY THE STATE OF FLORIDA.

- B. TO PERFORM ANY AND ALL FUNCTIONS OR SERVICES ALLOWABLE TO AN INSURANCE AGENT HOLDING THE LIFE AND HEALTH INSURANCE LICENSE AS PERMITTED BY THE STATE OF FLORIDA. THIS INCLUDES THE ORIGINATION AND SALES OF LIFE INSURANCE, HEALTH INSURANCE AND ANNUITY POLICIES TO ALL PARTIES.
- C. GENERALLY, TO MAKE AND PERFORM ALL CONTRACTS OF ANY KIND AND DESCRIPTION AND FOR THE PURPOSE OF ATTAINING ANY OF THE OBJECTIVES OF THE CORPORATION, TO DO AND PERFORM ANY OTHER ACTS OR THINGS, AND TO EXERCISE ANY AND ALL POWERS WHICH A COPARTNERSHIP OR NATURAL PERSON COULD DO OR EXERCISE, AND WHICH ARE NOW OR HEREAFTER MAY BE AUTHORIZED BY LAW AND GENERALLY, TO DO AND PERFORM AND ALL THINGS NECESSARY OR INCIDENTAL TO THE PERFORMING OR CARRYING OUT OF THE POWERS HEREIN ABOVE SPECIFICALLY DELEGATED OF IMPLIED.

#### ARTICLE 111

CAPITAL STOCK: THIS CORPORATION SHALL BE AUTHORIZED ONE HUNDRED (100) SHARES OF CAPITAL STOCK, ONE DOLLAR PAR VALUE, WHICH SAID STOCK SHALL BE ENTITLED TO ANY AND ALL DIVIDEND PAYMENTS, WHAT SOEVER, WHICH MAY BE DECLARED AND PAID BY THE CORPORATION DURING LTS EXISTENCE.

THE FOREGOING CAPITAL STOCK SHALL BE FULLY PAID AND NON-ASSESSABLE, AND THE CONSIDERATION FOR ALL SUCH STOCK SHALL BE PAYABLE IN CASH, PROPERTY, LABOR OR SERVICES AND THE VALUATION OF SUCH PROPERTY, SERVICES OR LABOR SHALL BE PROPERLY FIXED BY THE BOARD OF DIRECTORS AT A MEETING CALLED BY SUCH BOARD OF DIRECTORS

#### ARTICLE IV

REGISTERED AGENT: THE REGISTERED AGENT OF THE CORPORATION IS: SHELDON M. COHN, 7520 NW 5TH STREET, SUITE 100, PLANTATION, FLORIDA, 33317

SHELDON M. COHN

#### ARTICLE V

NUMBER OF DIRECTORS: THE NUMBER OF DIRECTORS OF THIS CORPORATION SHALL BE NOT LESS THAN ONE (1) NOR MORE THAN THREE (3).

#### ARTICLE VI

THE AMOUNT OF CAPITAL WITH WHICH TO BEGIN BUSINESS: THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION SHALL COMMENCE IS ONE HUNDRED DOLLARS (\$100).

#### ARTICLE VII

EXISTENCE: THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE.

#### ARTICLE VIII

BOARD OF DIRECTORS: THE NAMES AND ADDRESSES OF THE FIRST BOARD OF DIRECTORS OF THIS CORPORATION FOR THE FIRST YEAR OR UNTIL SUCCESSORS ARE NAMED SHALL BE:

AMY E. COHN 8020 FAIRVIEW DRIVE TAMARAC, FL 33321 PRESIDEN -- SECRETARY-TREASURER DIRECTO

JEFFREY T. LICHTNER 9471 NW 38TH PLACE SUNRISE, FL 33351 VICE PRESIDENT

#### ARTICLE IX

NAMES, ADDRESSES, SUBSCRIPTION, AND NUMBER OF SHARES: THE NAME AND POST OFFICE ADDRESSES OF EACH SUBSCRIBER AND NUMBER OF SHARES OF STOCK WHICH AGREE TO TAKE ARE:

NAME	SHARES	ADDRESS
JOSHUA S. COHN	70	11890 NW 7TH STREET PLANTATION, FL 33325
AMY E. COHN	10	8020 FAIRVIEW DRIVE PLANTATION, FL 33321
JEFFREY T. LICHTNER	20	9471 NW 38TH PLACE SUNRISE,FL 33351

#### ARTICLE IX

STOCKHOLDER'S AGREEMENTS: STOCKHOLDERS OF THIS CORPORATION MAY ENTER INTO SUCH STOCKHOLDER'S AND TRUSTEE'S AGREEMENTS AS THEY SEE FIT WHEREIN AND WHEREBY SUCH STOCKHOLDER'S AGREEMENTS SUCH PROVISIONS NOT TO BE CONTRARY TO THE LAWS OF THE STATE OF FLORIDA

IN WITNESS THEREOF, I HAVE HEREUNTO SET MY HAND AND SEAL TO ACKNOWLEDGE THE FOREGOING ARTICLES OF INCORPORATION TO BE FILED IN THE OFFICE OF THE SECRETARY OF STATE, THIS DAY OF JULY, 1995

SHELDON M. COHN

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 JUL 10 PH 3:05

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE
OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. THE NAME OF THE CORPORATION IS:

STAR FINANCIAL SERVICES, INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

SHELDON M. COHN
2520 NW 5TH STREET
PLANTATION / FLORIDA 33317

SIGNATURE:

TITLE:

INCORPORATOR / REGISTERED AGENT

JULY 6, 1995:

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CERTIFICATION AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HERREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE:

JULY 6, 1995: