

TRANSMITTAL LETTER
P96000013733

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

100001711421
-02/09/96--D1058--015
*****78.75 *****78.75

SUBJECT: MORTGAGE SERVICE CENTER OF SOUTH FLORIDA, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

Marsha G. Brunsworth

Name (printed or typed)

7390 NW 51 Street

Address

Lauderhill, FL 33319

City, State & Zip

954-572-6143

Daytime Telephone number

FILED
96 FEB -9 AM 9:25
SEAL DIV OF STATE
TALLAHASSEE, FLORIDA

FEB 14 1996 BSB

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MORTGAGE SERVICE CENTER OF SOUTH FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7390 NW 51 Street
Lauderhill, FL 33319

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Marsha G. Brunsworth
7390 NW 51 Street
Lauderhill, FL 33319

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TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATORS

The names and address of the person (s) signing these Articles of Incorporation are as follows:

Name Marsha G. Brunsworth
Address 7390 NW 51 St
City Lauderhill State Fl Zip 33319

Name _____
Address _____
City _____ State _____ Zip _____

Name _____
Address _____
City _____ State _____ Zip _____

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 8 day of February, 1996

Marsha G. Brunsworth (Seal)

(Seal)

STATE OF FLORIDA) SS
COUNTY OF BROWARD)

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Marsha G. Brunsworth
Fl. Lic. No. B656 54762 6640

known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 8 day of February, 1996

Barbara Galey
(Notary Public, State of Florida at large)

(Notary Seal)

My Commission expires:

OFFICIAL NOTARY SEAL
BARBARA GALEY
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC309587
MY COMMISSION EXP. SEPT 5, 1997

B. Officers:

President: Marsha G. Brunsworth
Address: 7390 NW 51 Street
Lauderhill, FL 33319

Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: Marsha G. Brunsworth
Address: 7390 NW 51 Street
Lauderhill, FL 33319

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

10. Name and Street address of Florida registered agent:

Name: Marsha G. Brunsworth
Office Address: 7390 NW 51 Street
Lauderhill, FL 33319
City Lauderhill **Zip Code** 33319

11. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and 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 obligations of my position as registered agent.

Registered agent's signature: Marsha G. Brunsworth

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

13. Marsha G. Brunsworth
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Marsha G. Brunsworth President

(Name and capacity of person signing application)

**CERTIFICATE OF DESIGNATION OF
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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: MORTGAGE SERVICE CENTER OF SOUTH FLORIDA, INC.

2. The name and address of the registered agent and office is:

Marsha G. Brunsworth

(NAME)

7390 NW 51 Street

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Lauderhill, FL 33319

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Marsha G. Brunsworth
(SIGNATURE)

2/9/96
(DATE)