

P96000015088
TRANSMITTAL LETTER

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

SUBJECT: COOP America Mortgage Corp
(Proposed corporate name - must include suffix)

500001714865
-02/14/96--01068--012
*****78.75 *****78.75

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:

Michelle Lind

Name (printed or typed)

839 31st Street

Address

WPB, FL 33407

City, State & Zip

407 882-8262 ext 187

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 FEB 14 AM 10:26

FILED

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

GB 2/19/96

ARTICLES OF INCORPORATION

FILED

96 FEB 14 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

COOP America Mortgage Corp.

ARTICLE II PRINCIPAL OFFICE

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

839 31st Street
WPB, FL 33407

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:

Michelle Lind
839 31st
WPB, FL 33407

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Michelle Lind
839 31 st
WPB, FL 33407

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

11 day of February, 19 96.

Michelle Lind
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**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.

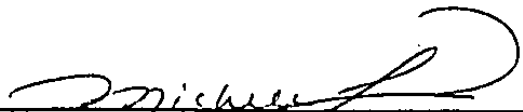
1. The name of the corporation is: COOP AMERICA Mortgage Corp

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

Michelle LIND
(NAME)
839 31 ST Street
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
West Palm Beach, FL 33407
(CITY/STATE/ZIP)

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SECRETARY OF STATE
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.


(SIGNATURE)

02/11/96
(DATE)