

**p96000103941**  
**TRANSMITTAL LETTER**

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

**SUBJECT:** AmeriLoan Financial Group, Inc.  
(Proposed corporate name - must include suffix)

300002036233--8  
-12/24/96--01019--005  
\*\*\*\*\*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:** Hector D. Martin  
Name (Printed or typed)  
2139 Amesbury Circle  
Address  
Wellington, FL 33414  
City, State & Zip  
(561) 798-9787  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

96 DEC 23 AM 10:05

**FILED**

84 DEC 30 1996

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

**ARTICLES OF INCORPORATION**

**FILED**  
96 DEC 23 AM 10:06  
TALLAHASSEE STATE  
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:

AmeriLoan Financial Group, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

2139 Amesbury Circle  
Wellington, FL 33414

**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:

Hector D. Martin  
2139 Amesbury Circle  
Wellington, FL 33414

**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):


Hector D. Martin  
2139 Amesbury Circle  
Wellington, FL 33414


Staci R. Martin  
2139 Amesbury Circle  
Wellington, FL 33414

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

18 day of December, 19 96.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**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: AmeriLoan Financial Group, Inc.,

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

Hector D. Martin

(NAME)

2139 Amesbury Circle

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

Wellington, FL 33414

(City/STATE/Zip)

**FILED**  
96 DEC 23 11:10:06  
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)

12/16/96

(DATE)