FLORIDA 33174 (305)552-5973 MIAMI, City/State/Zip Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. FORECLOSURE USA INC. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time ________ Certified Copy Photocopy ☐ Will wait Mail out Certificate of Status NEW FILINGS AT AMENDMENTS Profit Amendment Resignation of R.A., Officer/ Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger OTHER FILINGS Annual Report Foreign Fictitious Name Limited Pattnership Name Reservation Reinstatement Trademark Ollier

Examiner's Initials

ARTICLES OF INCORPORATION

OF

FORECLOSURE US A INC.

(Proper Noun)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I CORPORATION NAME

The corporation's name shall be: FORECLOSURE U S A INC.

ARTICLE II DURATION

This corporation shall exist perpetually unless dissolved according to Florida laws.

ARTICLE III PURPOSE

The corporation is organized for the purpose of engaging in any activity of business permited under the laws of the United States and the State of Florida.

ARTICLE IV CAPITAL STOCK

The corporation is authotized to issue <u>ONE HUNDRED</u> (<u>100</u>) shares of <u>Five dollars</u> (<u>\$5.00</u>) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V PLACE OF BUSINESS

The principal place of business of said corporation, shall be:

5510 CASTLEGATE AVE. DAVIE, BROWARD

FT 33331

ARTICLE VI NUMBER OF DIRECTORS

The number of Directors of this corporation, shall be no less than one (1) nor more than fifteen (15).

ARTICLE VII BOARD OF DIRECTORS

The name and addresses of the first Board of Directors of this corporation whoo shall hold office initially, are as follow:

	ł	NAME: M	GUEL R	ODRIGUEZ	, JR.			
		ADDRESS:	·····		-			
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	1	NAME:						
		ADDRESS:						
		CITY:		ST	ATE:	z.c.:		
	1	NAME:						•
		ADDRESS:_						
		CITY:		ST	ATE:	Z.C.:		
		NAME:					<u></u>	
		ADDRESS:_						
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	'	<u>.</u>		ARTICLE INCORPOR				
The name corporat	es and ion, a	addresses re as follo	of the	incorpor	ators s	signing the	ese Article	es of the
	NAME:	MIGUEL R	ODRIGUE	Z, JR.		TITLE:	President	
		SS: <u>5510 Cas</u>						
ļ	CITY:	Davie	·	STA	ATE: F	ī_z.c.:_	33331	
	NAME:					TITLE:		
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IN WITN	ESS WH ration	EREOF, the this 21	unsers: day of	igned sut fOctol	oscriber ber	(s) have e 1997	executed the	nese Article
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STATE OF FLORIDA COUNTY OF DADE

Before me, a Notary Public authorized to take adknowledgement in the State and County set for above, personally appeared:

MIGUEL RODRIGUEZ, JR.

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that $\underline{\text{HE}}$ executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 21 day of October , 1997.

Notary Public State of Florida at large

OFFICIAL NOTARY SEAL GEORGINA BALLINA NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC664575 MY COMMISSION EXP. JULY 16,2001

CERTIFICATE OF REGISTERED AGENT

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FORECLOSURE U S A INC.							
(Name of Corporation)							
In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:							
FIRST: That FORECLOSURE U S A INC. desirin							
(Proper Noun)							
organize under the laws of the State of Florida with its principal office,							
as indicated in the articles of incorporation at City of,							
County of <u>Broward</u> State of <u>Florida</u> , has named:							
To: MIguel Rodriguez, Jr.							
Located at: 5510 Castlegate Ave.							
City of: Davie County OF: Broward							
State of Florida.							
as its Agent to accept service of process within this State.							

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Registered Agent

I: 06 JATE ORIDA